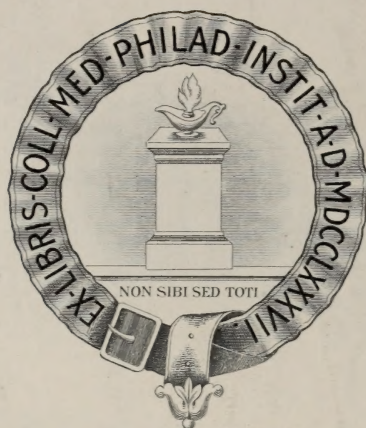




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THE  
PSYCHOANALYTIC  
REVIEW

A JOURNAL DEVOTED TO AN  
UNDERSTANDING OF HUMAN CONDUCT

EDITED AND PUBLISHED BY

WILLIAM A. WHITE, M.D.

AND

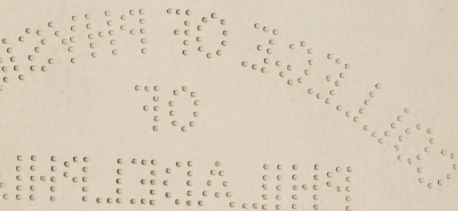
SMITH ELY JELLIFFE, M.D.

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VOLUME I

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## ORIGINAL ARTICLES

### THE THEORY OF PSYCHOANALYSIS

By C. G. JUNG, M.D., LL.D.

OF THE UNIVERSITY OF ZÜRICH

#### INTRODUCTION

In these lectures I have attempted to reconcile my practical experiences in psychoanalysis with the existing theory, or rather, with the approaches to such a theory. Here is my attitude towards those principles which my honored teacher Sigmund Freud has evolved from the experience of many decades. Since I have long been closely connected with psychoanalysis, it will perhaps be asked with astonishment how it is that I am now for the first time defining my theoretical position. When, some ten years ago, it came home to me what a vast distance Freud had already travelled beyond the bounds of contemporary knowledge of psycho-pathological phenomena, especially the psychology of the complex mental processes, I no longer felt myself in a position to exercise any real criticism. I did not possess the sorry mandarin-courage of those people who—upon a basis of ignorance and incapacity—consider themselves justified in “critical” rejections. I thought one must first work modestly for years in such a field before one might dare to criticize. The evil results of premature and superficial criticism have certainly not been lacking. A preponderating number of critics have attacked with as much anger as ignorance. Psychoanalysis has flourished undisturbed

and has not troubled itself one jot or tittle about the unscientific chatter that has buzzed around it. As everyone knows, this tree has waxed mightily, and not in one world only, but alike in Europe and in America. Official criticism participates in the pitiable fate of Proktophantasmist and his lamentation in the Walpurgis-night:

"You still are here? Nay, 'tis a thing unheard!  
Vanish at once! We've said the enlightening word."

Such criticism has omitted to take to heart the truth that all that exists has sufficient right to its existence: no less is it with psychoanalysis.

We will not fall into the error of our opponents, nor ignore their existence nor deny their right to exist. But then this enjoins upon ourselves the duty of applying a proper criticism, grounded upon a practical knowledge of the facts. To me it seems that psychoanalysis stands in need of this weighing-up from the inside.

It has been wrongly assumed that my attitude denotes a "split" in the psychoanalytic movement. Such a schism can only exist where faith is concerned. But psychoanalysis deals with knowledge and its ever-changing formulations. I have taken William James' pragmatic rule as a plumb-line: "You must bring out of each word its practical cash-value, set it at work within the stream of your experience. It appears less a solution, then, than as a program for more work and more particularly as an indication of the ways in which existing realities may be changed. *Theories thus become instruments, not answers to enigmas, in which we can rest.* We don't lie back upon them, we move forward, and, on occasion, make nature over again by their aid."

And so my criticism has not proceeded from academic arguments, but from experiences which have forced themselves on me during ten years earnest work in this sphere. I know that my experience in no wise approaches Freud's quite extraordinary experience and insight, but none the less it seems to me that certain of my formulations do present the observed facts more adequately than is the case in Freud's method of statement. At any rate I have found, in my teaching, that the conceptions put



forward in these lectures have afforded peculiar aid in my endeavors to help my pupils to an understanding of psychoanalysis. With such experience I am naturally inclined to assent to the view of Mr. Dooley, that witty humorist of the *New York Times*, when he says, defining pragmatism: "Truth is truth 'when it works.'" I am indeed very far from regarding a modest and moderate criticism as a "falling away" or a schism; on the contrary, through it I hope to help on the flowering and fructification of the psychoanalytic movement, and to open a path towards the scientific treasures of psychoanalysis for those who have hitherto been unable to possess themselves of psychoanalytic methods, whether through lack of practical experience or through distaste of the theoretical hypothesis.

For the opportunity to deliver these lectures I have to thank my friend Dr. Smith Ely Jelliffe, of New York, who kindly invited me to take part in the "Extension Course" at Fordham University. These lectures were given in September, 1912, in New York.

I must here also express my best thanks to Dr. Gregory, of Bellevue Hospital, for his ready support of my clinical demonstrations.

For the troublesome work of translation I am greatly indebted to my assistant, Miss M. Moltzer, and to Mrs. Edith Eder and Dr. Eder of London.

Only after the preparation of these lectures did Adler's book, "Ueber den nervösen Character," become known to me, in the summer of 1912. I recognize that he and I have reached similar conclusions on various points, but here is not the place to go into a more intimate discussion of the matter; that must take place elsewhere.

## CHAPTER I

### CONSIDERATION OF EARLY HYPOTHESES

It is not an easy task to speak about psychoanalysis in these days. I am not thinking, when I say this, of the fact that psychoanalysis in general—it is my earnest conviction—is among the most difficult scientific problems of the day. But even when we put this cardinal fact aside, we find many serious difficulties

which interfere with the clear interpretation of the matter. I am not capable of giving you a complete doctrine elaborated both from the theoretical and the empirical standpoint. Psychoanalysis has not yet reached such a point of development, although a great amount of labor has been expended upon it. Neither can I give you a description of its growth *ab ovo*, for you already have in your country, with its great regard for all the progress of civilization, a considerable literature on the subject. This literature has already spread a general knowledge of psychoanalysis among those who have a scientific interest in it.

You have had the opportunity of listening to Freud, the real explorer and founder of this method, who has spoken in your own country about this theory. As for myself, I have already had the honor of speaking about this work in America. I have discussed the experimental foundation of the theory of complexes and the application of psychoanalysis to pedagogy.

It can be easily understood that under these circumstances I fear to repeat what has already been said, or published in many scientific journals in this country. A further difficulty lies in the fact that in very many quarters there are already prevailing quite extraordinary conceptions of our theory, conceptions which are often absolutely wrong, and unfortunately wrong just in that which touches the very essence of psychoanalysis. At times it seems nearly impossible to grasp even the meaning of these errors, and I am constantly astonished to find any one with a scientific education ever arriving at ideas so divorced from all foundations in fact. Obviously it would be of no importance to cite examples of these curiosities, and it will be more valuable to discuss here those questions and problems of psychoanalysis which really might provoke misunderstanding.

#### A CHANGE IN THE THEORY OF PSYCHOANALYSIS

Although it has very often been repeated, it seems to be still an unknown fact to many people, that in these last years the theory of psychoanalysis has changed considerably. Those, for instance, who have only read the first book, "Studies in Hysteria," by Breuer and Freud, still believe that psychoanalysis essentially consists in the doctrine that hysteria, as well as other neuroses, has its root in the so-called "traumata," or shocks, of earliest child-



hood. They continue to condemn this theory, and have no idea that it is fifteen years since this conception was abandoned and replaced by a totally different one. This change is of such great importance in the whole development of psychoanalysis, as well for its technique as for its theory, that I must give it in some detail. That I may not weary you with the complete recitation of cases already well known, I will only just refer to those in Breuer and Freud's book, which I shall assume are known to you, for the book has been translated into English.<sup>1</sup> You will there have read that case of Breuer's, to which Freud referred in his lectures at Clark University. You will have found that the hysterical symptom has not some unknown organic source, but is based on certain highly emotional psychic events, so-called injuries of the heart, traumata or shocks. I think that now-a-days every careful observer of hysteria will acknowledge from his own experience that, at the root of this disease, such painful events are to be found. This truth was already known to the physicians of former days.

#### THE TRAUMATIC THEORY

So far as I know it was really Charcot who, probably under the influence of Page's theory of nervous shock, made this observation of theoretical value. Charcot knew, by means of hypnotism, at that time not understood, that hysterical symptoms could be called forth by suggestion as well as made to disappear through suggestion. Charcot believed that he saw something like this in those cases of hysteria caused by accident, cases which became more and more frequent. The shock can be compared with hypnosis in Charcot's sense. The emotion provoked by the shock causes a momentary complete paralysis of will-power, during which the remembrance of the trauma can be fixed as an auto-suggestion. This conception gives us the original theory of psychoanalysis. Etiological investigation had to prove whether this mechanism, or a similar one, was also to be found in those cases of hysteria which could not be called traumatic. This lack of knowledge of the etiology of hysteria was supplied by the discovery of Breuer and Freud. They proved that even in those ordinary cases of hysteria which cannot be said to be caused by

<sup>1</sup> "Selected Papers on Hysteria and Other Psychoneuroses," by Prof. Sigmund Freud. Nervous and Mental Disease Monograph Series, No. 4.

shock the same trauma-element was to be found, and seemed to have an etiological value. It is natural that Freud, a pupil of Charcot, was inclined to suppose that this discovery in itself confirmed the ideas of Charcot. Accordingly the theory elaborated out of the experience of that period, mainly by Freud, received the imprint of a traumatic etiology. The name of trauma-theory is therefore justified; nevertheless this theory had also a new aspect. I am not here speaking of the truly admirable profoundness and precision of Freud's analysis of symptoms, but of the relinquishing of the conception of auto-suggestion, which was the dynamic force in the original theory, and its substitution by a detailed exposure of the psychological and psycho-physical effects caused by the shock. The shock, the trauma, provokes a certain excitation which, under normal circumstances, finds a natural outlet ("abreagieren"). In hysteria it is only to a certain extent that the excitation does find a natural outlet; a partial retention takes place, the so-called blocking of the affect ("Affecteinklemmung"). This amount of excitation, which can be compared with an amount of potential energy, is transmuted by the mechanism of conversion into "physical" symptoms.

*The Cathartic Method.*—According to this conception, therapy had to find the means by which those retained emotions could be brought to a mode of expression, thereby setting free from the symptoms that amount of repressed and converted feeling. Hence this was called the cleansing, or *cathartic method*; its aim was to discharge the blocked emotions. From this it follows that analysis was then more or less closely concerned with the symptoms, that is to say, the symptoms were analyzed—the work of analysis began with the symptoms, a method abandoned to-day. The cathartic method, and the theory on which it is based, are, as you know, accepted by other colleagues, so far as they are interested at all in psychoanalysis, and you will find some appreciation and quotation of the theory, as well as of the method, in several text-books.

#### THE TRAUMATIC THEORY CRITICIZED

Although, as a matter of fact, the discovery of Breuer and Freud is certainly true, as can easily be proved by every case of hysteria, several objections can be raised to the theory. It must

be acknowledged that their method shows with wonderful clearness the connection between the actual symptoms and the shock, as well as the psychological consequences which necessarily follow from the traumatic event, but nevertheless, a doubt arises as to the etiological significance of the so-called trauma or shock.

It is extremely difficult for any critical observer of hysteria to admit that a neurosis, with all its complications, can be based on events in the past, as it were on one emotional experience long past. It is more or less fashionable at present to consider all abnormal psychic conditions, in so far as they are of exogenic growth, as the consequences of hereditary degeneration, and not as essentially influenced by the psychology of the patient and the environment. This conception is too narrow, and not justified by the facts. To use an analogy, we know perfectly well how to find the right middle course in dealing with the etiology of tuberculosis. There are, of course, cases of tuberculosis where in earliest childhood the germ of the disease falls upon a soil predisposed by heredity, so that even in the most favorable conditions the patient cannot escape his fate. None the less, there are also cases where, under favorable conditions, illness can be prevented, despite a predisposition to the disease. Nor must we forget that there are still other cases without hereditary disposition or individual inclination, and, in spite of this, fatal infection occurs. All this holds equally true of the neuroses, where matters are not essentially different in their method of procedure than they are in general pathology. Neither a theory in which the predisposition is all-important, nor one in which the influence of the environment is all-important, will ever suffice. It is true the shock-theory can be said to give predominance to the predisposition, even insisting that some past trauma is the condition *sine qua non* of the neurosis. Yet Freud's ingenious empiricism presented even in the "Studies in Hysteria" some views, insufficiently exploited at the time, which contained the elements of a theory that perhaps more accentuates the value of environment than inherited or traumatic predisposition.

#### THE CONCEPTION OF "REPRESSION"

Freud synthesized these observations in a form that was to extend far beyond the limits of the shock-theory. This concep-



tion is the hypothesis of repression ("Verdrängung"). As you know, by the word "repression" is understood the psychic mechanism of the re-transportation of a conscious thought into the unconscious sphere. We call this sphere the "unconscious" and define it as the psyche of which we are not conscious. The conception of repression was derived from the numerous observations made upon neurotic patients who seemed to have the capacity of forgetting important events or thoughts, and this to such an extent that one might easily believe nothing had ever happened. These observations can be constantly made by anyone who comes into close psychological relations with his patients. As a result of the Breuer and Freud studies, it was found that a very special method was needed to call again into consciousness those traumatic events long since forgotten. I wish to call attention to this fact, since it is decidedly astonishing for a priori we are not inclined to believe that valuable things can ever be forgotten. For this reason several critics object that the reminiscences which have been called into consciousness by certain hypnotic processes are only suggested ones, and do not correspond with reality. Even granting this, it would certainly not be justifiable to regard this in itself as a condemnation of "repression," since there are and have been not a few cases where the fact of repressed reminiscences can be proved by objective demonstration. Even if we exclude this kind of proof, it is possible to test the phenomena by experiment. The association-tests provide us with the necessary experiences. Here we find the extraordinary fact that associations pertaining to complexes saturated with emotion emerge with much greater difficulty into consciousness, and are much more easily forgotten.

As my experiments on this subject were never reexamined, the conclusions were never adopted, until just lately, when Wilhelm Peters, a disciple of Kraepelin, proved in general my previous observation, namely, that painful events are very rarely correctly reproduced ("die unlustbetonten Erlebnisse werden am seltensten richtig reproduciert").

As you see, the conception rests upon a firm empirical basis. There is still another side of the question worth looking at. We might ask if the repression has its root in a conscious determination of the individual, or do the reminiscences disappear rather

passively without conscious knowledge on the part of the patient? In Freud's works you will find a series of excellent proofs of the existence of a conscious tendency to repress what is painful. Every psychoanalyst will know more than a dozen cases showing clearly in their history one particular moment at least in which the patient knows more or less clearly that he will not allow himself to think of the repressed reminiscences. A patient once gave this significant answer: "Je l'ai mis de côté" (I have put it aside).

But, on the other hand, we must not forget that there are a number of cases where it is impossible for us to show, even with the most careful examination, the slightest trace of conscious repression; in these cases it seems as if the mechanism of repression were much more in the nature of a passive disappearance, or even as if the impressions were dragged beneath the surface by some force operating from below. From the first class of cases we get the impression of complete mental development, accompanied by a kind of cowardice in regard to their own feelings; but among the second class of cases you may find patients showing a more serious retardation of development. The mechanism of repression seems here to be much more an automatic one.

This difference is closely connected with the question I mentioned before—that is, the question of the relative importance of predisposition and environment. The first class of cases appears to be mainly influenced by environment and education; in the other, predisposition seems to play the chief part. It is pretty clear where treatment will have more effect. (As I have already said, the conception of repression contains an element which is in intrinsic contradiction with the shock-theory.) We find, for instance, in the case of Miss Lucy R.,<sup>2</sup> described by Freud, that the essential etiological moment is not to be found in the traumatic scenes, but in the insufficient readiness of the patient to set store upon the convictions passing through her mind. But if we think of the later views we find in the "Selected Papers on Hysteria,"<sup>3</sup> where Freud, forced through further experience, supposes certain traumatic sexual events in early

<sup>2</sup> Monograph No. 4, p. 14.

<sup>3</sup> *Ibid.*

childhood to be the source of the neurosis, then we get the impression of an incongruity between the conception of repression and that of shock. The conception of "repression" contains the elements of an etiological theory of environment, while the conception of "shock" is a theory of predisposition.

But at first the theory of neurosis developed along the lines of the trauma conception. Pursuing Freud's later investigations, we see him coming to the conclusion that no such positive value can be ascribed to the traumatic events of later life, as their effects could only be conceivable if the particular predisposition of the patient were taken into account. Evidently the enigma was to be resolved just at this point. As the analytical work progressed, the roots of hysterical symptoms were found in childhood; they reached back from the present far into the past. The further end of the chain threatened to get lost in the mists of early childhood. But it was just there that reminiscences appeared of certain scenes where sexual activities had been manifested in an active or passive way, and these were unmistakably connected with the events which provoked the neurosis. (For further details of these events you must consult the works of Freud, as well as the numerous analyses which have already been published.)

#### THE THEORY OF SEXUAL TRAUMA IN CHILDHOOD

Hence arose the theory of sexual trauma in childhood which provoked bitter opposition, not from theoretical objections against the shock-theory in general, but against the element of sexuality in particular. In the first place, the idea that children might be sexual, and that sexual thoughts might play any part with them, aroused great antagonism. In the second place, the possibility that hysteria had a sexual basis was most unwelcome, for the sterile position that hysteria was either a reflex neurosis of the uterus or arose from lack of sexual satisfaction had just been given up. Naturally, therefore, the real value of Freud's observations was disputed. If critics had limited themselves to that question, and had not adorned their opposition with moral indignation, a calm discussion would have been possible. In Germany, for instance, this method of attack made it impossible to get any credit for Freud's theory. As soon as the question of sexuality



was touched general resistance, as well as haughty contempt were awakened. But in truth there was but one question at issue: were Freud's observations true or not? That alone could be of importance to a really scientific mind. It is possible that these observations do not seem very probable at first sight, but it is unjustifiable to condemn them a priori as false. Wherever really sincere and thorough investigations have been carried out it has been possible to corroborate his observations. The fact of a psychological chain of consequences has been absolutely confirmed, although Freud's original conception, that real traumatic scenes were always to be found, has not been.

#### THEORY OF SEXUAL TRAUMA ABANDONED

Freud himself abandoned his first presentation of the shock-theory after further and more thorough investigation. He could no longer retain his original view as to the reality of the sexual shock. Excessive sexuality, sexual abuse of children, or very early sexual activity in childhood, were later on seen to be of secondary importance. You will perhaps be inclined to share the suspicion of the critics that the results derived from analytic researches were based on suggestion. There might be some justification for this view if these assertions had been published broadcast by some charlatan or ill-qualified person. But anyone who has carefully read Freud's works, and has himself similarly sought to penetrate into the psychology of his patients, will know that it is unjust to attribute to an intellect like Freud's the crude mistakes of a journeyman. Such suggestions only redound to the discredit of those who make them. Ever since then patients have been examined by every possible means from which suggestion could be absolutely excluded. And still the associations described by Freud have been proved to be true in principle. We are thus obliged in the first place to regard many of these shocks of early childhood as phantoms, while other traumata have objective reality. With this knowledge, at first somewhat confusing, the etiological importance of the sexual trauma in childhood declines, as it seems now quite irrelevant whether the trauma really took place or not. Experience teaches us that phantasy can be, so to speak, of the same traumatic value as real

shock. In the face of such facts, every physician who treats hysteria will recall cases where the neurosis has indeed been provoked by violent traumatic impressions. This observation is only in apparent contradiction with our knowledge, already referred to, of the unreality of traumatic events in childhood. We know perfectly well that many persons suffer shocks in childhood or in adult life who nevertheless get no neurosis. Therefore the trauma has, *ceteris paribus*, no absolute etiological importance, but owes its efficacy to the nature of the soil upon which it falls.

#### THE PREDISPOSITION FOR THE TRAUMA

No neurosis will grow on an unprepared soil where no germ of neurosis is already existing; the trauma will pass by without leaving any permanent and effective mark. From this simple consideration it is pretty clear that, to make it really effective, the patient must meet the shock with a certain internal predisposition. This internal predisposition is not to be understood as meaning that totally obscure hereditary predisposition of which we know so little, but as a psychological development which reaches its apogee and its manifestation at the moment, and even through, the trauma.

I will show you first of all by a concrete case the nature of the trauma and its psychological predisposition. A young lady suffered from severe hysteria after a sudden fright. She had been attending a social gathering that evening and was on her way home at midnight, accompanied by several acquaintances, when a carriage came behind her at full speed. Everyone else drew aside, but she, paralyzed by fright, remained in the middle of the street and ran just in front of the horses. The coachman cracked his whip, cursed and swore without any result. She ran down the whole length of the street, which led to a bridge. There her strength failed her, and to escape the horses' feet she thought, in her extreme despair, of jumping into the water, but was prevented in time by passers-by. This very same lady happened to be present a little later on that bloody day, the 22d of January, in St. Petersburg, when a street was cleared by soldiers' volleys. Right and left of her she saw people dying or falling down badly wounded. Remaining perfectly calm and clear-minded, she caught sight of a gate that gave her escape into another street.

These terrible moments did not agitate her, either at the time, or later on. Whence it must follow that the intensity of the trauma is of small pathogenic importance: the special conditions form the essential factors. Here, then, we have the key by which we are able to unlock at least one of the anterooms to the understanding of predisposition. We must next ask what were the special circumstances in this carriage-scene. The terror and apprehension began as soon as the lady heard the horses' footsteps. It seemed to her for a moment as if these betokened some terrible fate, portending her death or something dreadful. Then she lost consciousness. The real causation is somehow connected with the horses. The predisposition of the patient, who acts thus wildly at such a commonplace occurrence, could perhaps be found in the fact that horses had a special significance for her. It might suffice, for instance, if she had been once concerned in some dangerous accident with horses. This assumption does hold good here. When she was seven years old, she was once out on a carriage-drive with the coachman; the horses shied and approached the steep river-bank at full speed. The coachman jumped off his seat, and shouted to her to do the same, which she was barely able to do, as she was frightened to death. Still, she sprang down at the right moment, whilst the horses and carriage were dashed down below.

It is unnecessary to prove that such an event must leave a lasting impression behind. But still it does not offer any explanation for the exaggerated reaction to an inadequate stimulus. Up till now we only know that this later symptom had its prologue in childhood, but the pathological side remains obscure. To solve this enigma we require other experiences. The amnesia which I will set forth fully later on shows clearly the disproportion between the so-called shock and the part played by phantasy. In this case phantasy must predominate to an extraordinary extent to provoke such an effect. The shock in itself was too insignificant. We are at first inclined to explain this incident by the shock that took place in childhood, but it seems to me with little success. It is difficult to understand why the effect of this infantile trauma had remained latent so long, and why it only now came to the surface. The patient must surely have had opportunities enough during her lifetime of getting out of the



way of a carriage going full speed. The reminiscence of the danger to her life seems to be quite insufficiently effective: the real danger in which she was at that one moment in St. Petersburg did not produce the slightest trace of neurosis, despite her being predisposed by an impressive event in her childhood. The whole of this traumatic event still lacks explanation; from the point of view of the shock-theory we are hopelessly in the dark.

You must excuse me if I return so persistently to the shock-theory. I consider this necessary, as now-a-days many people, even those who regard us seriously, still keep to this standpoint. Thus the opponents to psychoanalysis and those who never read psychoanalytic articles, or do so quite superficially, get the impression that in psychoanalysis the old shock-theory is still in force.

The question arises: what are we to understand by this predisposition, through which an insignificant event produces such a pathological effect? This is the question of chief significance, and we shall find that the same question plays an important rôle in the theory of neurosis, for we have to understand why apparently irrelevant events of the past are still producing such effects that they are able to interfere in an impish and capricious way with the normal reactions of actual life.

#### THE SEXUAL ELEMENT IN THE TRAUMA

The early school of psychoanalysis, and its later disciples, did all they could to find the origin of later effects in the special kind of early traumatic events. Freud's research penetrated most deeply. He was the first, and it was he alone, who discovered that a certain sexual element was connected with the shock. It is just this sexual element which, speaking generally, we may consider as unconscious, and it is to this that the traumatic effect is generally due. The unconsciousness of sexuality in childhood seems to throw a light upon the problem of the persistent constellation of the primary traumatic event. The true emotional meaning of the accident was all along hidden from the patient, so that in consciousness this emotion was never brought into play, the emotion never wore itself out, it was never used up. We might perhaps explain the effect in the following way: this persistent constellation was a kind of "*suggestion à échéance*,"

for it is unconscious and the action occurs only at the stipulated moment.

It is hardly necessary to give detailed examples to prove that the true nature of sexual manifestations during infancy is not understood. Physicians know, for instance, how often a manifest masturbation persisting up to adult life, especially in women, is not understood as such. It is, therefore, easy to realize that to a child the true nature of certain actions would be far less conscious. And that is the reason why the real meaning of these events, even in adult life, is still hidden from our consciousness. In some cases, even, the traumatic events are themselves forgotten, either because their sexual meaning is quite unknown to the patient, or because their sexual character is unacceptable, being too painful. It is what we call "repressed."

As we have already mentioned, Freud's observation, that the admixture of a sexual element with the shock is essential for any pathological effect, leads on to the theory of the *infantile sexual trauma*.

This hypothesis may be thus expressed: the pathogenic event is a sexual one. This conception forced its way with difficulty. The general opinion that children have no sexuality in early life made such an etiology inadmissible, and at first prevented its acceptance.

#### THE INFANTILE SEXUAL PHANTASY

The change in the shock-theory already referred to, namely, that in general the shock is not even real, but is essentially a phantasy, did not make things better. On the contrary, still worse, since we are forced to the conclusion that we find in the infantile phantasy at least one positive sexual manifestation. It is no longer some brutal accidental impression from the outside, but a positive sexual manifestation created by the child itself, and this very often with unmistakable clearness. Even real traumatic events of an outspoken sexual type do not always happen to a child quite *without its coöperation*, but are not infrequently apparently *prepared and brought about by the child itself*. Abraham stated this, proving his statement with evidence of the greatest interest, and this, in connection with many other experiences of the same kind, makes it very probable that even really

sexual scenes are frequently called forth and supported by the peculiar psychological state of the child's mind. Perfectly independently from psychoanalytic investigation, medical criminology has discovered striking parallels to this psychoanalytic statement.

## CHAPTER II

### THE INFANTILE SEXUALITY

The precocious manifestations of sexual phantasy as cause of the shock now seemed to be the source of neurosis. This, logically, attributed to children a far more developed sexuality than had been hitherto admitted. Many cases of precocious sexuality had been recorded in literature long before the time of psychoanalysis. For instance, a girl of two years old with normal menstruation, or cases of boys of three and four and five years of age having normal erections, and so far ready for cohabitation. These were, however, curiosities. Great astonishment was caused when Freud began to attribute to the child, not only ordinary sexuality, but even polymorphic perverse sexuality; all this based upon the most exhaustive investigation. People inclined much too lightly to the superficial view, that all this was merely suggested to the patients, and was a highly disputable artificial product. Hence Freud's<sup>4</sup> "Three Contributions to the Sexual Theory" not only provoked opposition, but even violent indignation. It is surely unnecessary to insist upon the fact that science is not furthered by indignation, and that arguments of moral resentment may perhaps please the moralist—that is his business—but not a scientific man, for whom truth must be the guide, and not moral indignation. If matters are really as Freud describes them, all indignation is absurd; if they are not so, again indignation will avail nothing. The conclusion as to what is the truth can only be arrived at on the field of observation and research, and nowhere else. The opponents of psychoanalysis with certain honorable exceptions, display rather ludicrously a somewhat pitifully inadequate realization of the situation. Although the psychoanalytic school could unfortunately learn nothing from their critics, as the criticism took no notice of its investigations, and although it could not get any useful hints, because the psycho-

<sup>4</sup> No. 7 of the Monograph Series.



analytic method of investigation was, and still is unknown to these critics, it remains a serious duty for our school to explain thoroughly the contrast between the existing conceptions. It is not our endeavor to put forward a paradoxical theory contradicting all existing theories, but rather to introduce a certain category of new observations into science. Therefore we regard it as a duty to do whatever we can to promote agreement. It is true, we must renounce all hope of obtaining the approval of those who blindly oppose us, but we do hope to come to an understanding with scientific men. This will be my endeavor now in attempting to sketch the further intellectual development of the psychoanalytic conception, so far as the so-called sexual theory of the neuroses is concerned.

### OBJECTIONS TO THE SEXUAL HYPOTHESIS

As I said, the finding of precocious sexual phantasies, which seemed the source of the neurosis, forced Freud to the view of a highly developed sexuality in infancy. As you know, the reality of this observation has been contested by many, who maintain that crude error, that narrow-minded delusion, misled Freud and his whole school, alike in Europe and in America, so that the Freudians saw things that never existed. They regarded them as people in the grip of an intellectual epidemic. I have to admit that I possess no way of defending myself against criticism of this kind. The only thing I can do is to refer to my own work, asking thoughtful persons if they discover there any clear indications of madness. Moreover, I must maintain that science has no right to start with the idea that certain facts do not exist. At the most one can say: "This seems very improbable—we want still more proofs and more research." This is also our reply to the objection: "It is impossible to discover anything trustworthy by the psychoanalytic method, as this method is practically absurd." No one believed in Galileo's telescope, and Columbus discovered America on a false hypothesis. The psychoanalytic method may be full of errors, but this should not prevent its use. Many chronological and medical observations have been made with inadequate instruments. We must regard the objections to the method as pretexts until our opponents come to grip with the

facts. It is there a decision must be reached—not by wordy warfare.

Our opponents also call hysteria a psychogenic disease. We believe that we have discovered the etiological determinants of this disease and we present, without fear, the results of our investigation to open criticism. Whoever cannot accept our results should publish his own analyses of cases. So far as I know, that has never been done, at least not in European literature. Under these circumstances, critics have no right to deny our conclusions *a priori*. Our opponents have likewise cases of hysteria, and those cases are surely as psychogenic as our own. There is nothing to prevent their pointing out the psychological determinants. The method is not the real question. Our opponents content themselves with disputing and reviling our researches, but they do not point out any better way.

Many other critics are more careful and more just, and do admit that we have made many valuable observations, and that the associations of ideas given by the psychoanalytic method will very probably stand, but they maintain that our point of view is wrong. The alleged sexual phantasies of childhood, with which we are here chiefly concerned, must not be taken, they say, as real sexual functions, being obviously something quite different, since at the approach of puberty the characteristic peculiarities of sexuality are acquired.

This objection, being calmly and reasonably made, deserves to be taken seriously. Such objections must also have occurred to every one who has taken up analytic work, and there is reason enough for deep reflection.

### THE CONCEPTION OF SEXUALITY

The first difficulty arises with the conception of sexuality. If we take sexuality as meaning the fully-developed function, we must confine this phenomenon to maturity, and then, of course, we have no right to speak of sexuality in childhood. If we so limit our conception, then we are confronted again with new and much greater difficulties. The question arises, how then must we denominate all those correlated biological phenomena pertaining to the sexual functions *sensu strictiori*, as, for instance, pregnancy,

childbirth, natural selection, protection of the offspring, etc. It seems to me that all this belongs to the conception of sexuality as well, although a very distinguished colleague did once say, "Childbirth is not a sexual act." But if these things do pertain to this concept of sexuality, then there must also belong innumerable psychological phenomena. For we know that an incredible number of the pure psychological functions are connected with this sphere. I shall only mention the extraordinary importance of phantasy in the preparation for the sexual function. Thus we arrive rather at a biological conception of sexuality, which includes both a series of psychological phenomena as well as a series of physiological functions. If we might be allowed to make use of an old but practical classification, we might identify sexuality with the so-called instinct of the preservation of the species, as opposed in some way to the instinct of self-preservation.

Looking at sexuality from this point of view, we shall not be astonished to find that the root of the instinct of race-preservation, so extraordinarily important in nature, goes much deeper than the limited conception of sexuality would ever allow. Only the more or less grown-up cat actually catches mice, but the kitten plays at least as if it were catching mice. The young dog's playful indications of attempts at cohabitation begin long before puberty. We have a right to suppose that mankind is no exception to this rule, although we do not notice similar things on the surface in our well brought-up children. Investigation of the children of the lower classes proves that they are no exceptions to the biological rule. It is of course infinitely more probable that this most important instinct, that of the preservation of the race, is already nascent in the earliest childhood, than that it falls at one swoop from heaven, full-fledged, at the age of puberty. The sexual organs also develop long before the slightest sign of their future function can be noticed. Where the psychoanalytic school speaks of sexuality, this wider conception of its function must be linked to it, and we do not mean simply that physical sensation and function generally designated by the term sexual. It might be said that, in order to avoid any misunderstanding on this point, the term sexuality should not be given to these preparatory phenomena in childhood. This demand is surely not justified, since the anatomical nomenclature is taken from the



fully-developed system, and special names are not generally given to more or less rudimentary formations.

After all, the objections to the terminology do not spring so much from objective arguments, as from those tendencies which lie at the base of moral indignation. But then no objection can be made to the sex-terminology of Freud, as he rightly gives to the whole sexual development the general name of sexuality. But certain conclusions have been drawn which, so far as I can see, cannot be maintained.

### THE "SEXUALITY" OF THE SUCKLING

When we examine how far back in childhood the first traces of sexuality reach, we have to admit implicitly that sexuality already exists *ab ovo*, but only becomes manifest a long time after intrauterine life. Freud is inclined to see in the function of taking the mother's breast already a kind of sexuality. Freud was bitterly reproached for this view, but it must be admitted that it is very ingenious, if we follow his hypothesis, that the instinct of the preservation of the race has existed separately from the instinct of self-preservation *ab ovo* and has undergone a separate development. This way of thinking is not, however, a biological one. It is not possible to separate the two ways of manifestation of the hypothetical vital process, and to credit each with a different order of development. If we limit ourselves to judging by what we can actually observe, we must reckon with the fact that everywhere in nature we see that the vital processes in an individual consist for a considerable space of time in the functions of nutrition and growth only. We see this very clearly in many animals; for instance, in butterflies, which as caterpillars pass an asexual existence of nutrition and growth. To this stage of life we may allot both the intrauterine life and the extrauterine time of suckling in man. This time is marked by the absence of all sexual function; hence to speak of manifest sexuality in the suckling would be a *contradictio in adjecto*.

The most we can do is to ask if, among the life-functions of the suckling, there are any that have not the character of nutrition, or of growth, and hence could be termed sexual. Freud points out the unmistakable emotion and satisfaction of the child while suckling, and compares this process with that of the sexual

act. This similarity leads him to assume the sexual quality in the act of suckling. This conclusion is only admissible if it can be proved that the tension of the need, and its gratification by a release, is a sexual process. That the act of suckling has this emotional mechanism proves, however, just the contrary. Therefore we can only say this emotional mechanism is found both in nutrition and in the sexual function. If Freud by analogy deduces the sexual quality of sucking from this emotional mechanism, then his biological empiricism would also justify the terminology qualifying the sexual act as a function of nutrition. This is unjustifiably exceeding the bounds in either case. It is evident that the act of sucking cannot be qualified as sexual.

We are aware, however, of functions in the suckling stage which have apparently nothing to do with the function of nutrition, such as sucking the finger, and its many variations. This is perhaps the place to discuss whether these things belong to the sexual sphere. These acts do not subserve nutrition, but produce pleasure. Of that there is no doubt, but nevertheless it is disputable whether this pleasure which comes by sucking should be called by analogy a sexual satisfaction. It might be called equally pleasure by nutrition. This latter qualification has even the further justification that the form and kind of pleasure belong entirely to the function of nutrition. The hand which is used for sucking finds in this way preparation for future use in feeding one's self. Under these circumstances nobody will be inclined by a *petitio principii* to characterize the first manifestation of human life as sexual. The statement which we make that the act of sucking is attended by a feeling of satisfaction leaves us in doubt whether the sucking does contain anything else but the character of nutrition. We notice that the so-called bad habits shown by a child as it grows up are closely linked with early infantile sucking, such for instance as putting the finger in the mouth, biting the nails, picking the nose, ears, etc. We see, too, how closely these habits are connected with later masturbation. By analogy, the conclusion that these infantile habits are the first step to onanism, or to actions similar to onanism, and are therefore of a well-marked sexual character cannot be denied: it is perfectly justified. I have seen many cases in which a correlation existed between these childish habits and later masturbation. If

this masturbation takes place in later childhood, before puberty, it is nothing but an infantile bad habit. From the fact of the correlation between masturbation and the other childish bad habits, we conclude that these habits have a sexual character, in so far as they are used to obtain physical satisfaction from the child's own body.

This new standpoint is comprehensible and perhaps necessary. It is only a few steps from this point of view to regarding the infant's act of sucking as of a sexual character. As you know, Freud took the few steps, but you have just heard me reject them. We have come to a difficulty which is very hard to solve. It would be relatively easy if we could accept two instincts side by side, each an entity in itself. Then the act of sucking the breast would be both an action of nutrition and a sexual act. This seems to be Freud's conception. We find in adults the two instincts separated, yet existing side by side, or rather we find that there are two manifestations, in hunger, and in the sexual instinct. But at the sucking age, we find only the function of nutrition, rewarded by both pleasure and satisfaction. Its sexual character can only be argued by a *petitio principii*, for the facts show that the act of sucking is the first to give pleasure, not the sexual function. Obtaining pleasure is by no means identical with sexuality. We deceive ourselves if we think that in the suckling both instincts exist side by side, for then we project into the psyche of the child the facts taken from the psychology of adults. The existence of the two instincts side by side does not occur in suckling, for one of these instincts has no existence as yet, or, if existing, is quite rudimentary. If we are to regard the striving for pleasure as something sexual, we might as well say paradoxically that hunger is a sexual striving, for this instinct seeks pleasure by satisfaction. If this were true, we should have to give our opponents permission to apply the terminology of hunger to sexuality. It would facilitate matters, were it possible to maintain that both instincts existed side by side, but it contradicts the observed facts and would lead to untenable consequences.

Before I try to resolve this opposition, I must first say something more about Freud's sexual theory, and its transformations.



## THE POLYMORPHIC PERVERSE SEXUALITY OF INFANCY

We have already reached the conclusion, setting out from the idea of the shock being apparently due to sexual phantasies, that the child must have, in contradiction to the views hitherto prevailing, a nearly fully formed sexuality, and even a *polymorphic perverse sexuality*. Its sexuality does not seem concentrated on the genital functions or on the other sex, but is occupied with its own body; whence it is said to be auto-erotic. If its sexual instinct is directed to another person, no distinction, or but the very slightest, is made as to sex. It can, therefore, be very easily homo-sexual. In place of non-existing local sexual function there exists a series of so-called bad habits, which from this standpoint look like a series of perversities, since they have the closest analogy with the later perversities. In consequence of this way of regarding the subject, sexuality, whose nature is ordinarily regarded as a unit, becomes decomposed into a multiplicity of isolated striving forces. Freud then arrived at the conception of the so-called "erogenous zones," by which he understood mouth, skin, anus, etc. (It is, of course, a universal tacit presumption that sexuality has its origin in the sexual organs.)

The term "erogenous zone" reminds us of "spasmo-genic zones," and the underlying image is at all events the same; just as the spasmo-genic zone is the place whence the spasm arises, so the erogenous zone is the place whence arises an affluent to sexuality. Based upon the model of the genital organs as the anatomical origin of sexuality, the erogenous zones must be conceived as being so many genitals out of which the streams of sexuality flow together. This is the condition of the *polymorphic perverse sexuality of childhood*. The expression "perverse" seems to be justified by the close analogy with the later perversities which present, so to speak, but a new edition of certain early infantile perverse habits. They are very often connected with one or other of the different erogenous zones, and are the cause of those exchanges in sex, which are so characteristic for childhood.

According to this view, the later normal and monomorphic sexuality is built up out of several components. The first division is into homo- and hetero-sexual components, to which is linked an auto-erotic component, as also there are components of

the different erogenous zones. This conception can be compared with the position of physics before Robert Mayer, when only isolated forces, having elementary qualities, were recognized, whose interchanges were little understood. The law of the conservation of energy brought order into the inter-relationship of the forces, at the same time abolishing the conception of those forces as absolute elements, but regarding them as interchangeable manifestations of one and the same energy.

### THE SEXUAL COMPONENTS AS ENERGIC MANIFESTATIONS

Conceptions of great importance do not arise only in one brain, but are floating in the air and dip here and there, appearing even under other forms, and in other regions, where it is often very difficult to recognize the common fundamental idea. Thus it happened with the splitting up of sexuality into the polymorphic perverse sexuality of childhood.

Experience forces us to accept a constant exchange of isolated components as we notice more and more that, for instance, perversities exist at the expense of normal sexuality, or that the increase of certain kinds of sex-manifestations causes corresponding deficiencies of another kind. To make the matter clearer, let me give you an instance: A young man had a homo-sexual phase lasting for some years, during which time women had no interest for him. This abnormal condition changed gradually toward his twentieth year and his erotic interest became more and more normal. He began to take great interest in girls, and soon the last traces of his homo-sexuality were conquered. This condition lasted several years, and he had some successful love-affairs. Then he wished to get married; he had here to suffer a great disappointment, as the girl to whom he proposed refused him. During the ensuing phase he absolutely abandoned the idea of marriage. After that he experienced a dislike of all women, and one day he discovered that he was again perfectly homo-sexual, that is, young men had an unusually irritating influence upon him. To regard sexuality as composed of a fixed hetero-sexual component, and a like homo-sexual element, will never suffice to explain this case, for the conception of the existence of fixed components excludes any kind of transformation.

To understand the case, we have to admit a great mobility of the sexual components, which even goes so far that one of the components can practically disappear completely, whilst the other comes to the front. If only substitution took place, if for instance the homo-sexual component entered the unconscious, leaving the field of consciousness to the hetero-sexual component, modern scientific knowledge would lead us to conclude that equivalent effects arose from the unconscious sphere. Those effects would have to be conceived as resistances against the activity of the hetero-sexual component, as a repugnance towards women.

Experience tells us nothing about this. There have been some small traces of influences of this kind, but of such slight intensity that they cannot be compared with the intensity of the former homo-sexual component. On the conception that has been outlined, it is also incomprehensible how this homo-sexual component, regarded as so firmly fixed, can ever disappear without leaving active traces. To explain things, the process of development is called in, forgetting that this is only a word and explains nothing. You see, therefore, the urgent necessity of an adequate explanation of such a change of scene. For this we must have a dynamic hypothesis. Such commutations are only conceivable as dynamic or energetic processes. I cannot conceive how manifestations of functions can disappear if I do not accept a change in the relation of one force to another. Freud's theory did have regard to this necessity in the conception of components. The presumption of isolated functions existing side by side began to be somewhat weakened, more in practice than theoretically. It was replaced by an energetic conception. The term chosen for this conception is "libido."

### CHAPTER III

#### THE CONCEPTION OF LIBIDO

Freud had already introduced the idea of libido in his<sup>5</sup> "Three Contributions to the Sexual Theory" in the following words:

"In biology, the fact that both mankind and animals have a sexual want is expressed by the conception of the sexual desire. This is done by analogy with the want of nourishment, so-called

<sup>5</sup> No. 7 of the Monograph Series.



hunger. Popular speech has no corresponding characterization for the word "hunger," and so science uses the word "libido."

In Freud's definition, the term "libido" appears as exclusively a sexual desire. "Libido" as a medical term is certainly used for sexual desire, and especially for sexual lust. But the classical definition of this word as found in Cicero, Sallust, and others, was not so exclusive. The word is there used in a more general sense for every passionate desire. I only just mention this definition here, as further on it plays an important part in our considerations, and as it is important to know that the term "libido" has really a much wider meaning than is associated with it through medical language.

The idea of libido (while maintaining its sexual meaning in the author's sense as long as possible) offers us the dynamic value which we are seeking in order to explain the shifting of the psychological scenery. With this conception it is much simpler to formulate the phenomena in question, instead of by the incomprehensible substitution of the homo- by the hetero-sexual component. We may say now that the libido has gradually withdrawn from its homo-sexual manifestation and is transferred in the same measure into a hetero-sexual manifestation. Thus the homo-sexual component practically disappears. It remains only an empty possibility, signifying nothing in itself. Its very existence, therefore, is rightly denied by the laity, just as we doubt the possibility that any man selected at random would turn out to be a murderer. By the use of this conception of libido many relations between the isolated sexual functions are now easily explicable.

The early idea of the multiplicity of sexual components must be given up: it savors too much of the ancient philosophical notion of the faculties of the mind. Its place is taken by libido which is capable of manifold applications. The earlier components only represent possibilities of activities. With this conception of libido, the original idea of a divided sexuality with different roots is replaced by a dynamic unity, without which the formerly important components remain but empty possibilities of activities. This development in our conception is of great importance. We have here the same process which Robert Mayer introduced into dynamics. Just as the conception of the con-

servation of energy removed their character as elements from the forces, imparting to them the character of a manifestation of energy, so the libido theory similarly removes from the sexual components the idea of the mental "faculties" as elements ("Seelen Vermögen"), and ascribes to them merely phenomenal value. This conception represents the impression of reality far more than the theory of components. With a libido-theory we can easily explain the case of the young man. The disappointment he met with, just at the time he had definitely decided on a hetero-sexual life, drove his libido again from the hetero-sexual manifestation into a homo-sexual form, thus calling forth his entire homo-sexuality.

#### THE ENERGIC THEORY OF LIBIDO

I must point out here that the analogy with the law of the conservation of energy is very close. In both cases the question arises when an effect of energy disappears, where is this energy meanwhile, and where will it reemerge? Applying this point of view as a heuristic principle to the psychology of human conduct, we shall make some astonishing discoveries. Then we shall see how the most heterogeneous phases of individual psychological development are connected in an energetic relationship. Every time we see a person who is splenetic or has a morbid conviction, or some exaggerated mental attitude, we know here is too much libido, and the excess must have been taken away from somewhere else where there is too little. From this standpoint, psychoanalysis is that method which discovers those places or functions where there is too little or too much libido, and restores the just proportions. Thus the symptoms of a neurosis must be considered as exaggerated and correspondingly disturbed functional manifestations overflowing with libido. The energy which has been used for this purpose has been taken away from somewhere else, and it is the task of the psychoanalyst, to restore it whence it was taken, or to bestow it where it was never before given. Those complexes of symptoms which are mainly characterized by lack of libido, for instance, the so-called apathetic conditions, force us to reverse the question. Here we have to ask, where did the libido go? The patient gives us the impression of having no

libido, and there are occasionally physicians who believe exactly what the patients tell them. Such physicians have a primitive way of thinking, like the savage who believes, when he sees an eclipse of the sun, that the sun has been swallowed up and put to death. But the sun is only hidden, and so it is with these patients. Although the libido is there, it is not get-at-able, and is inaccessible to the patient himself. Superficially, we have here a lack of libido. It is the task of psychoanalysis to search for that hidden place where the libido dwells, and where it is as a rule inaccessible to the patient. The hidden place is the non-conscious, which may also be called the unconscious, without ascribing to it any mysterious significance.

#### THE CONCEPTION OF UNCONSCIOUS PHANTASY

Psychoanalytic experience has taught us that there are non-conscious systems which, by analogy with conscious phantasies, can be described as phantasy-systems of the unconscious. In cases of neurotic apathy these phantasy systems of the unconscious are the objects of the libido. We know well that, when we speak of unconscious phantasy systems, we only speak figuratively. We do not mean more by this than that we accept as an indispensable postulate the conception of psychic entities existing outside consciousness. Experience teaches us, we might say daily, that there are unconscious psychic processes which influence the disposition of the libido in a perceptible way. Those cases, known to every psychiatrist in which complicated symptoms of delusions emerge with relative great suddenness, show clearly that there must be unconscious psychic development and preparation, for we cannot regard them as having been just suddenly formed when they entered consciousness.

#### THE SEXUAL TERMINOLOGY

I feel myself justified in making this digression concerning the unconscious. I have done it to point out that, with regard to shifting of the manifestations of the libido, we have to deal not only with the conscious, but also with another factor, the unconscious, whither the libido sometimes disappears. We have not yet followed up the discussion of the further consequences which result from the adoption of the libido-theory.



Freud has taught us, and we see it in the daily practice of psychoanalysis, that in earlier childhood, instead of the normal later sexuality, we find many tendencies which in later life are called perversions. We have to admit that Freud has the right to give to these tendencies a sexual terminology. Through the introduction of the conception of the libido, we see that in adults those elementary components which seemed to be the origin and the source of normal sexuality, lose their importance, and are reduced to mere potentialities. The effective power, their life force, is to be found in the libido. Without libido these components mean nothing. We saw that Freud gives to the conception of libido an undoubted sexual definition, somewhat in the sense of sexual desire. The general view is, that libido in this sense only comes into being at the age of puberty. How are we then to explain the fact that in Freud's view a child has a polymorphic-perverse sexuality, and that therefore, in children, the libido brings into action not only one, but several possibilities? If the libido, in Freud's sense, begins its existence at puberty, it could not be held accountable for earlier infantile perversions. In that case, we should have to regard these infantile perversions as "faculties of the mind," in the sense of the theory of components. Apart from the hopeless theoretical confusion which would thus arise, we must not multiply explanatory principles in accordance with the philosophical axiom: "*principia praeter necessitatem non sunt multiplicanda*."

There is no other way but to agree that before and after puberty it is the same libido. Hence, the perversities of childhood have arisen exactly in the same way as those of adults. Common sense will object to this, as obviously the sexual needs of children cannot possibly be the same as those of adults. We might admit, with Freud, that the libido before and after puberty is the same, but is different in its intensity. Instead of the intense post-pubertal sexual desire, there would be first a slight sexual desire in childhood, with diminishing intensity until, as we reach back to the first year, it is but a trace. We might admit that we are biologically in agreement with this formulation. It would then have to be also agreed that everything that falls into the region of this enlarged conception of sexuality is already pre-existing but in miniature; for instance, all those emotional mani-

festations of psycho-sexuality: desire for affection, jealousy, and many others, and by no means least, the neuroses of childhood.

It must, however, be admitted that these emotional manifestations of childhood by no means make the impression of being in miniature; their intensity can rival that of an affect among adults. Nor must it be forgotten that experience has shown that perverse manifestations of sexuality in childhood are often more glaring, and indeed seem to have a greater development, than in adults. If an adult under similar conditions had this apparently excessive form of sexuality, which is practically normal in children, we could rightly expect a total absence of normal sexuality, and of many other important biological adaptations. An adult is rightly called perverse when his libido is not used for normal functions, and the same could be said of a child: it is polymorphous perverse since it does not know normal sexual functions.

These considerations suggest the idea that perhaps the amount of libido is always the same, and that no increase first occur at puberty. This somewhat audacious conception accords with the example of the law of the conservation of energy, according to which the quantity of energy remains always the same. It is possible that the summit of maturity is reached when the infantile diffuse applications of libido discharge themselves into the one channel of definite sexuality, and thus lose themselves therein. For the moment we must content ourselves with these suggestions, for we must next pay attention to one point of criticism concerning the quality of the infantile libido.

Many critics do not admit that the infantile libido is simply less intense or is essentially of the same kind as the libido of adults. The emotions among adults are correlated with the genital functions. This is not the case in children, or it is only so in miniature, or exceptionally, and this gives rise to an important distinction, which must not be undervalued.

I believe such an objection is justified. There is really a considerable difference between immature and fully developed functions, as there is a difference between play and reality, between shooting with blank and with loaded cartridges. That the childish libido has the harmlessness demanded by common sense cannot be contested. But of course none can deny that blank

shooting is shooting. We must get accustomed to the idea that sexuality really exists, even before puberty, right back in early childhood, and that we have no right to pretend that manifestations of this immature sexuality are not sexual. This does not indeed refute the objection, which, while recognizing the existence of infantile sexuality in the form already described, yet denies Freud's claim to regard as sexual early infantile manifestations such as sucking. We have mentioned already the motives which induced Freud to enlarge the sexual terminology in such a way. We mentioned, too, how this very act of sucking, for instance, could be conceived from the standpoint of pleasure in the function of nutrition, and that, on biological grounds, there was more justification for this derivation than for Freud's view. It might be objected that these and similar activities of the oral zones are found in later life in an undoubted sexual use. This only means that these activities can in later life be used for sexual purposes, but that does not tell us anything concerning the primitive sexual nature of these forms. I must, therefore, admit that I find no ground for regarding the activities of the suckling, which provoke pleasure and satisfaction, from the standpoint of sexuality. Indeed there are many objections against this conception. It seems to me, in so far as I am capable of judging these difficult problems, that from the standpoint of sexuality it is necessary to divide human life into three phases.

### THE THREE PHASES OF LIFE

The first phase embraces the first years of life. I call this part of life the pre-sexual stage. These years correspond to the caterpillar-stage of butterflies, and are characterized almost exclusively by the functions of nutrition and growth.

The second phase embraces the later years of childhood up to puberty, and might be called the pre-pubertal stage.

The third phase is that of riper years, proceeding only from puberty onwards, and could be called the time of maturity.

You cannot have failed to notice that we become conscious of the greatest difficulty when we arrive at the question at what age we must put the limit of the pre-sexual stage. I am ready to confess my uncertainty with regard to this problem. If I survey the psychoanalytical experiences with children, as yet insuffi-



ciently numerous, at the same time keeping in mind the observations made by Freud, it seems to me that the limit of this phase lies between the third and fifth years. This, of course, with due consideration for the greatest individual diversities. From various aspects this is an important age. The child has emancipated itself already from the helplessness of the baby, and a series of important psychological functions have acquired a firm hold. From this period on, the obscurity of the early infantile "amnesia," or the *discontinuity of the early infantile consciousness*, begins to clear up through the *sporadic continuity of memory*. It seems as if, at this age, a considerable step had been made towards emancipation and the formation of a new and independent personality. As far as we know, the first signs of interest and activity which may fairly be called sexual fall into this period, although these sexual indications have still the infantile characteristics of harmlessness and naiveté. I think I have sufficiently demonstrated why a sexual terminology cannot be given to the pre-sexual stage, and so we may now consider the other problems from the standpoint we have just reached. You will remember that we dropped the problem of the libido in childhood, because it seemed impossible to arrive at any clearness in that way. But now we are obliged to take up the question again, if only to see whether the energetic conception harmonizes with the principles just advanced. We saw, following Freud's conception, that the altered manifestations of the infantile sexuality, if compared with those of maturity, are to be explained by the diminution of sexuality in childhood.

#### THE SEXUAL DEFINITION OF LIBIDO MUST BE ABANDONED

The intensity of the libido is said to be diminished relatively to the early age. But we advanced just now several considerations to show why it seems doubtful if we can regard the vital functions of a child, sexuality excepted, as of less intensity than those of adults. We can really say that, sexuality excepted, the emotional phenomena, and, if nervous symptoms are present, then these likewise are quite as intense as those of adults. On the energetic conception of the libido all these things are but manifestations of the libido. But it becomes rather difficult to conceive

that the intensity of the libido can ever constitute the difference between a mature and an immature sexuality. The explanation of this difference seems rather to postulate a change in the localization of the libido (if the expression be allowed). In contradistinction to the medical definition the libido in children is occupied far more with certain side-functions of a mental and physiological nature than with local sexual functions. One is here already tempted to remove from the term libido the predicate "sexualis," and thus to have done with the sexual definition of the term given in Freud's "Three Contributions." This necessity becomes imperative, when we put it in the form of a question: The child in the first years of its life is intensely living—suffering and enjoying—the question is, whether his striving, his suffering, his enjoyment are by reason of his libido sexualis? Freud has pronounced himself in favor of this supposition. There is no need to repeat the reasons through which I am compelled to accept the pre-sexual stage. The larva stage possesses a libido of nutrition, if I may so express it, but not yet the libido sexualis. It is thus we must put it, if we wish to keep the energetic conception which the libido theory offers us. I think there is nothing for it but to abandon the sexual definition of libido, or we shall lose what there is valuable in the libido theory, that is, the energetic conception. For a long time past the desire to extend the meaning of libido, and to remove it from its narrow and sexual limitations, has forced itself upon Freud's school. One was never weary of insisting that sexuality in the psychological sense was not to be taken too literally, but in a broader connotation; but exactly how, that remained obscure, and thus too, sincere criticism remained unsatisfied.

I do not think I am going astray if I see the real value of the libido theory in the energetic conception, and not in its sexual definition. Thanks to the former, we are in possession of a most valuable heuristic principle. We owe to the energetic conception the possibility of dynamic ideas and relationships, which are of inestimable value for us in the chaos of the psychic world. The Freudians would be wrong not to listen to the voice of criticism, which reproaches our conception of libido with mysticism and inaccessibility. We deceived ourselves in believing that we could ever make the libido sexualis the bearer of the energetic conception

of the psychical life, and if many of Freud's school still believe they possess a well-defined and almost complete conception of libido, they are not aware that this conception has been put to use far beyond the bounds of its sexual definition. The critics are right when they object to our theory of libido as explaining things which cannot belong to its sphere. It must be admitted that Freud's school makes use of a conception of libido which passes beyond the bounds of its primary definition. Indeed, this must produce the impression that one is working with a mystical principle.

#### THE PROBLEM OF LIBIDO IN DEMENTIA PRÆCOX

I have sought to show these infringements in a special work, "Wandlungen und Symbole der Libido," and at the same time the necessity for creating a new conception of libido, which shall be in harmony with the energetic conception. Freud himself was forced to a discussion of his original conception of libido when he tried to apply its energetic point of view to a well-known case of dementia præcox—the so-called Schreber case. In this case, we had to deal, among other things, with that well-known problem in the psychology of dementia præcox, the loss of adaptation to reality, the peculiar phenomenon consisting in a special tendency of these patients to construct an inner world of phantasy of their own, surrendering for this purpose their adaptation to reality. As a part of the phenomenon, the lack of sociability or emotional rapport will be well known to you all, this representing a striking disturbance of the function of reality. Through considerable psychological study of these patients we discovered, that this lack of adaptation to reality is compensated by a progressive increase in the creation of phantasies. This goes so far that the dream-world is for the patient more real than external reality. The patient Schreber, described by Freud, found for this phenomenon an excellent figurative description in his delusion of the "end of the world." His loss of reality is thus very concretely represented. The dynamic conception of this phenomenon is very clear. We say that the libido withdrew itself more and more from the external world, consequently entered the inner world, the world of phantasies, and had there to create, as a compensation for the lost external world, a so-



called equivalent of reality. This compensation is built up piece by piece, and it is most interesting to observe the psychological materials of which this inner world is composed. This way of conceiving the transposition and displacement of the libido has been made by the every-day use of the term, its original pure sexual meaning being very rarely recalled. In general, the word "libido" is used practically in so harmless a sense that Claparède, in a conversation, once remarked that we could as well use the word "interest."

The manner in which this expression is generally used has given rise to a way of using the term that made it possible to explain Schreber's "end of the world" by withdrawal of the libido. On this occasion, Freud recalled his original sexual definition of the libido, and tried to arrive at an understanding with the change which in the meantime had taken place. In his article on Schreber, he discusses the question, whether what the psychoanalytic school calls libido, and conceives of as "interest from erotic sources" coincides with interest generally speaking. You see that, putting the problem in this way, Freud asks the question which Claparède practically answered. Freud discusses the question here, whether the loss of reality noticed in dementia præcox, to which I drew attention in my book,<sup>6</sup> "The Psychology of Dementia Præcox," is due entirely to the withdrawal of erotic interest, or if this coincides with the so-called objective interest in general. We can hardly agree that the normal "fonction du réel" [Janet] is only maintained through erotic interest. The fact is that, in many cases, reality vanishes altogether, and not a trace of psychological adaptation can be found in these cases. Reality is repressed, and replaced by phantasies created through complexes. We are forced to say that not only the erotic interests, but interests in general—that is, the whole adaptation to reality—are lost. I formerly tried, in my "Psychology of Dementia Præcox," to get out of this difficulty by using the expression "psychic energy," because I could not base the theory of dementia præcox on the theory of transference of the libido in its sexual definition. My experience—at that time chiefly psychiatric—did not permit me to understand this theory. Only later did I learn to understand the correctness of the theory as regards

<sup>6</sup> No. 3 of the Monograph Series.

the neuroses by increased experience in hysteria and the compulsion neurosis. As a matter of fact, an abnormal displacement of libido, quite definitely sexual, does play a great part in the neuroses. But although very characteristic repressions of sexual libido do take place in certain neuroses, that loss of reality, so typical for dementia præcox, never occurs. In dementia præcox, so extreme is the loss of the function of reality that this loss must also entail a loss of motive power, to which any sexual nature must be absolutely denied, for it will not seem to anyone that reality is a sexual function. If this were so, the withdrawal of erotic interests in the neuroses would lead to a loss of reality—a loss of reality indeed that could be compared with that in dementia præcox. But, as I said before, this is not the case. These facts have made it impossible for me to transfer Freud's libido theory to dementia præcox. Hence, my view is, that the attempt made by Abraham, in his article "The Psycho-Sexual Differences Between Hysteria and Dementia Præcox," is from the standpoint of Freud's conception of libido theoretically untenable. Abraham's belief, that the paranoidal system, or the symptomatology of dementia præcox, arises by the libido withdrawing from the external world, cannot be justified if we take "libido" according to Freud's definition. For, as Freud has clearly shown, a mere introversion or regression of the libido leads always to a neurosis, and not to dementia præcox. It is impossible to transfer the libido theory, with its sexual definition, directly to dementia præcox, as this disease shows a loss of reality not to be explained by the deficiency in erotic interests.

It gives me particular satisfaction that our master also, when he placed his hand on the fragile material of paranoiac psychology, felt himself compelled to doubt the applicability of his conception of libido which had prevailed hitherto. My position of reserve towards the ubiquity of sexuality which I allowed myself to adopt in the preface to my "Psychology of Dementia Præcox"—although with a complete recognition of the psychological mechanism—was dictated by the conception of the libido theory of that time. Its sexual definition did not enable me to explain those disturbances of functions which affect the indefinite sphere of the instinct of hunger, just as much as they do those of sexuality. For a long time the libido theory seemed to me inapplicable to dementia præcox.

## THE GENETIC CONCEPTION OF LIBIDO

With greater experience in my analytical work, I noticed that a slow change of my conception of libido had taken place. A genetic conception of libido gradually took the place of the descriptive definition of libido contained in Freud's "Three Contributions." Thus it became possible for me to replace, by the expression "psychic energy," the term libido. The next step was that I asked myself if now-a-days the function of reality consists only to a very small extent of sexual libido, and to a very large extent of other impulses. It is still a very important question, considered from the phylogenetic standpoint, whether the function of reality is not, at least very largely, of sexual origin. It is impossible to answer this question directly, in so far as the function of reality is concerned. We shall try to come to some understanding by a side-path.

A superficial glance at the history of evolution suffices to teach us that innumerable complicated functions, whose sexual character must be denied, are originally nothing but derivations from the instinct of propagation. As is well known, there has been an important displacement in the fundamentals of propagation during the ascent through the animal scale. The offspring has been reduced in number, and the primitive uncertainty of impregnation has been replaced by a quite assured impregnation, and a more effective protection of offspring. The energy required for the production of eggs and sperma has been transferred into the creation of mechanisms of attraction, and mechanisms for the protection of offspring. Here we find the first instincts of art in animals, used for the instinct of propagation, and limited to the rutting season. The original sexual character of these biological institutions became lost with their organic fixation, and their functional independence. None the less, there can be no doubt as to their sexual origin, as, for instance, there is no doubt about the original relation between sexuality and music, but it would be a generalization as futile, as unesthetic, to include music under the category of sexuality. Such a terminology would lead to the consideration of the Cathedral of Cologne under mineralogy, because it has been built with stones. Those quite ignorant of the problems of evolution are much astonished to find how few



things there are in human life which cannot finally be reduced to the instinct of propagation. It embraces nearly everything, I think, that is dear and precious to us.

We have hitherto spoken of the libido as of the instinct of reproduction, or the instinct of the preservation of the species, and limited our conception to that libido which is opposed to hunger, just as the instinct of the preservation of the species is opposed to that of self-preservation. Of course in nature this artificial distinction does not exist. Here we find only a continuous instinct of life, a will to live, which tries to obtain the propagation of the whole race by the preservation of the individual. To this extent this conception coincides with that of Schopenhauer's "will," as objectively we can only conceive a movement as a manifestation of an internal desire. As we have already boldly concluded that the libido, which originally subserved the creation of eggs and seed, is now firmly organized in the function of nest-building, and can no longer be employed otherwise, we are similarly obliged to include in this conception every desire, hunger no less. We have no warrant whatever for differentiating essentially the desire to build nests from the desire to eat.

I think you will already understand the position we have reached with these considerations. We are about to follow up the energetic conception by putting the energetic mode of action in place of the purely formal functioning. Just as reciprocal actions, well known in the old natural science, have been replaced by the law of the conservation of energy, so here too, in the sphere of psychology, we seek to replace the reciprocal activities of co-ordinated psychical faculties by energy, conceived as one and homogeneous. Thus we must bow to the criticism which reproaches the psychoanalytic school for working with a mystical conception of libido. I have to dispel this illusion that the whole psychoanalytic school possesses a clearly conceived and obvious conception of libido. I maintain that the conception of libido with which we are working is not only not concrete or known, but is an unknown *X*, a conceptual image, a token, and no more real than the energy in the conceptual world of the physicist. In this wise only can we escape those arbitrary transgressions of the proper boundaries, which are always made when we want to

reduce coördinated forces to one another. Certain analogies of the action of heat with the action of light are not to be explained by saying that this *tertium comparationis* proves that the undulations of heat are the same as the undulations of light; the conceptual image of energy is the real point of comparison. If we regard libido in this way we endeavor to simulate the progress which has already been made in physics. The economy of thought which physics has already obtained we strive after in our libido theory. We conceive libido now simply as energy, so that we are in the position to figure the manifold processes as forms of energy. Thus, we replace the old reciprocal action by relations of absolute equivalence. We shall not be astonished if we are met with the cry of vitalism. But we are as far removed from any belief in a specific vital power, as from any other metaphysical assertion. We term libido that energy which manifests itself by vital processes, which is subjectively perceived as aspiration, longing and striving. We see in the diversity of natural phenomena the desire, the libido, in the most diverse applications and forms. In early childhood we find libido at first wholly in the form of the instinct of nutrition, providing for the development of the body. As the body develops, there open up, successively, new spheres of influence for the libido. The last, and, from its functional significance, most overpowering sphere of influence, is sexuality, which at first seems very closely connected with the function of nutrition. With that you may compare the well-known influence on propagation of the conditions of nutrition in the lower animals and plants.

In the sphere of sexuality, libido does take that form whose enormous importance justifies us in the choice of the term "libido," in its strict sexual sense. Here for the first time libido appears in the form of an undifferentiated sexual primitive power, as an energy of growth, clearly forcing the individual towards division, budding, etc. The clearest separation of the two forms of libido is found among those animals where the stage of nutrition is separated by the pupa stage from the stage of sexuality. Out of this sexual primitive power, through which one small creature produces millions of eggs and sperm, derivatives have been developed by extraordinary restriction of fecundity, the functions of which are maintained by a special dif-

ferentiated libido. This differentiated libido is henceforth *desexualized*, for it is dissociated from its original function of producing eggs and sperm, nor is there any possibility of restoring it to its original function. The whole process of development consists in the increasing absorption of the libido which only created, originally, products of generation in the secondary functions of attraction, and protection of offspring. This development presupposes a quite different and much more complicated relationship to reality, a true function of reality which is functionally inseparable from the needs of reproduction. Thus the altered mode of reproduction involves a correspondingly increased adaptation to reality. This, of course, does not imply that the function of reality is exclusively due to differentiation in reproduction. I am aware that a large part of the instinct of nutrition is connected with it. Thus we arrive at an insight into certain primitive conditions of the function of reality. It would be fundamentally wrong to pretend that the compelling source is still a sexual one. It *was* largely a sexual one originally. The process of absorption of the primitive libido into secondary functions certainly always took place in the form of so-called affluxes of sexual libido ("libidinöse Zuschüsse").

That is to say, sexuality was diverted from its original destination, a definite quantity was used up in the mechanisms of mutual attraction and of protection of offspring. This transference of sexual libido from the sexual sphere to associated functions is still taking place (*e. g.*, modern neo-Malthusianism is the artificial continuation of the natural tendency). We call this process *sublimation*, when this operation occurs without injury to the adaptation of the individual; we call it *repression*—when the attempt fails. From the descriptive standpoint psychoanalysis accepts the multiplicity of instincts, and, among them, the instinct of sexuality as a special phenomenon, moreover, it recognizes certain affluxes of the libido to asexual instincts.

*To be continued.*



## THE CASE OF MISS A

### A PRELIMINARY REPORT OF A PSYCHOANALYTIC STUDY AND TREATMENT OF A CASE OF SELF-MUTILATION

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#### INTRODUCTION

I have called this a preliminary report, because I have much more material relating to the case than I can possibly crowd into a paper of moderate length. It makes no claim to originality. If it has any novelty it is only in the application of psychoanalytic methods, for therapeutic purposes, to a concrete case of self-mutilation. So far as I know there is no published psychoanalysis of a case of self-mutilation. If the external limitations of space and time did not prohibit, I should like very much to present the case more fully; for instance, I have not included a study of the patient's dreams, of which she had a great many.

The question as to whether this is a case of masochism or not comes immediately, of course, to mind. Krafft-Ebing defines masochism as the desire to experience pain from the sexual object. *In this case, however, object and subject are one.* Besides, he says, "the extreme consequences of masochism, however, are checked by the instinct of self-preservation, and therefore murder and serious injury, which may be committed in sadistic excitement, have here in reality, so far as known, no passive equivalent."<sup>1</sup> *This is a case of self-inflicted serious injury.* But Krafft-Ebing records only two cases of female masochism and one of these was in the "initial stages of paranoia persecutoria."<sup>2</sup> *This patient was not insane.* For the purposes of this paper, therefore, perhaps it would be better to leave the question of definition and comparison undecided for the present.

<sup>1</sup> Psychopathia Sexualis, p. 116.

<sup>2</sup> *Ibid.*, p. 190.

One further introductory word seems necessary. There are two stages of scientific development: (1) Classifications, (2) causal sequences. This paper does not attempt to bring together a lot of cases and classify them—it is an account of only one case; but, in the opinion of the author, it does offer an adequate account of the causal sequences leading, in this particular instance, to the self-mutilation. The critical reader can easily distinguish between the “facts” and my “interpretation” of them. Much of the patient’s interpretation, of course, was learned from me, a process necessary to therapeusis.

The patient was a young woman twenty-three years old. She came to the Hospital with a self-inflicted cut on her left arm. Her arm had many other scars, and there was one on her breast: she said she had cut herself twenty-eight or thirty times; and on the calf of her right leg was a scar forming the letter W.

Two problems presented themselves: Why did she cut herself? How could she be helped?

The physical and mental examination gave but negative results. The patient was quiet and completely amenable, showing excellent judgment, in her attitude in the ward.

The following facts were all gleaned from the patient, and so far as objective truth is concerned, are uncorroborated. *Objective* truth, however, is unimportant, in a psychological sense, and of the *subjective* truth of the account I was finally convinced by the manner and attitude of the patient, during daily conferences lasting over a month. The patient herself fully believed what she said.

#### ANAMNESIS

As a baby the patient was her father’s pet, and was also much made of by the male boarders in the family. With the advent of other daughters, however, the father paid less and less attention to her. He was a cruel man. He used to thrash his sons unmercifully, often stripping and tying them to a bed post. Although he never thrashed the patient she lived in mortal terror lest he would do so. The thing she feared more even than the whipping, she said, was being stripped.

One day, when about eight years old, she trampled on her

father's garden, of which he was inordinately proud, and was seen by her uncle, one of the men boarders. He threatened to tell her father, which frightened her dreadfully; but promised not to tell if she would let him do as he liked. She did, and for many years (five or six) he was accustomed almost daily to masturbate her. She accepted it in a perfectly frigid manner although at first it was very painful, and from this time forth she hated her father, because fear of him made her submit to this degradation. Finally, at the age of fourteen, however, she learned that her uncle was attempting to do the same thing to her younger sister. Though she had never told any one, she became bold to do for her sister what she did not dare to do for herself, and threatened him with telling her father. She then discovered that he really was afraid lest she tell, and thus she escaped. But not until he had attempted coitus. This he did when she was only twelve years old.

As the patient matured she became abnormally stout. Her catamenia began when she was about thirteen, but were always very irregular. In the shop, for she was then working, the girls said irregular menses were the cause of either consumption or insanity. This she believed, more or less, because she was having severe headaches, and she attributed them to her irregular menses.

One day, about three years ago, as she was cutting bread, her cousin, boarding with her family at the time, attempted a sexual assault. In the scuffle she cut herself with the bread knife. This was enough for her assailant, who left her alone. It happened that at the time of this attempted assault the patient was suffering from an intense headache. After cutting herself, however, she noticed that the headache had left. She said she continued the cutting as a means of gaining relief from headaches, and from a "*queer feeling*" which she could not describe.

After a while the patient became aware that what she wanted more than anything else was a baby; but because of what she had passed through as a child, she regarded marriage as impossible. At a moment of intense mental agony over this more conscious conflict she took her brother's razor and cut her breast, thinking that if she could have no babies her breasts were useless. Here the sexual nature of her acts became apparent. After much thinking on the subject, and as the result of concrete advice, she



determined to have a baby, without marriage. For this purpose, though she had never before done such a thing, she accepted the attentions of a man who had been soliciting her for some time. She stayed with him a short while but then left him because he "insulted" her. She did not become pregnant. Some time later another man wanted to marry her. She cared for him, and would have married him, but first, she felt it necessary to tell him all. As was natural, he then refused to marry her and called her a whore. She left him and went to her brother's room, and for the first and only time in her life took some whiskey, found his razor and cut on her leg the letter W. (In this relation Hawthorne's "Scarlet Letter" is interesting.)

After I had been working with the patient a short time I asked her to write for me a history of her self-mutilation. In her account one can get an idea as to the patient's natural intellectual ability. She was taken out of school and sent to work in a factory at about thirteen years of age and has worked there ever since. Some further idea of her family's sexual morality is suggested by the fact that she said all her brothers but one asked her for "connections" (*i. e.*, coitus). She denied gratifying their request. The following is in her own words:

"The first time I cut myself was about three years ago, and then I cut myself on the wrist of the left arm. It was not a very bad cut. A student at the Hospital took two stitches in it. Before I cut myself I had what I called a crazy headache, and after I had let blood my headache went away, and I thought that the cutting of my wrist, and letting the blood flow had cured it. I do not remember very clearly how I felt at the time.

"It was about three weeks afterwards that I decided I must cut myself again. All during the week I had been feeling queer, and I thought because I was feeling so queer it was because I did not have my menses regularly—it was six months since I had been unwell—so I'd deliberately made up my mind that I would do it. I went upstairs to my brother's room, and found his razor. I opened it, and held out my arm, and rested my arm on the dresser. I was shaking all over, it seemed to me that I would not have the nerve to do it even if my head did ache, and I did think that it would cure my headache, and help me to menstruate regularly like other girls did. I had about decided that I would

not, when I happened to look up and saw myself in the mirror. That settled it, all my nerve came back. I remember distinctly that I sneered at my reflection in the glass and said something about nobody caring if I killed myself, much less if I only cut myself, so I drew the razor slowly across my wrist, and made a deep cut. It then took three stitches to sew it up.

"The next time I did not cut myself, but I took a piece of German silver wire about five-eighths of an inch in length, and pushed it in to my right hand considerably below the thumb. I did it because I was feeling queer again and wanted to get away and walk, and walk. I wanted to do something, anything but sit and think of myself, and different things. The wire kept me still for about five days, when I went to the hospital to have it taken out. I did not mind having the wire in my hand, but my headache had not wholly gone away, and it was starting to ache worse, so I went to the hospital because I knew they would have to cut to probe for it. They probed for it for about four hours, and did not find it. They told me to return the next day. I did, and they probed for about an hour, when they said that if I wanted to come back in the afternoon they would give me ether, and take it out. I returned in the afternoon more because I was curious to know how it felt to take ether than anything else. I kept them busy with that hand for about a month; they didn't seem to know why it didn't heal up.

"It was quite a while before my head ached very badly again, and when it did ache I tried hard to control myself for I was getting a little bit afraid. It was about five o'clock in the morning. My head had been aching badly for two days. I had gone to bed very much discouraged. I slept badly, and had horrible dreams mostly of a sexual nature—at that time anything about sex was most repulsive to me—I woke about 4:30 o'clock, and lay there and thought about everything, everything disagreeable that had ever happened to me especially about what happened when I was a child, and about my cousin. At last I could not stand it any longer, and in a manner almost frantic I went into my brother's room and took his razor—he was working nights—and slashed at my arm. I did not do it slowly. I did it quickly, because I hated myself, and some other people, and in a way I felt that by hurting myself I was hurting them and also I was wishing that

I could do it to them only I knew I could not even if they were where I could reach them, because I dislike to see people suffer. I felt so badly over cutting myself, and also so ashamed that I did not have it attended for about a day and a half. Dr. ——— took two stitches in it. He asked me why I did it. I told him I did it because I did not menstruate regularly. He told me lies, and treated me for about four weeks.

"I do not remember the exact length of time between each cut, but I think it was about four weeks when I cut myself one noontime just before I went out to go to work. This time it was about three months since I had menstruated, and I had been thinking about it, and also about Y—. He wanted me, but I was not quite sure that I wanted to shake him because I did like him for some things, so I let him think that I would think it over—about belonging to him in every way. I thought it over, and it made my head ache so, that I decided it by cutting my arm. When I had cut my arm the bad feelings went away, and I had no thought of giving myself to him. Dr. ——— took five stitches in it. He sent me to Dr. ——— to have him examine me to see if there was any reason why I should not menstruate.

"The next time I cut myself I had been feeling quiet for about a week. I did not care about anything. I knew only one thing, and that was that I wanted something. I did not know what I wanted, but all week I had been conscious of a feeling of lost. I had always had that feeling of something being left out, a sense of lost, so to speak, but that week it seemed to be aggravated. It was Sunday, and I was making beds, my hair had fallen down, and I went to the mirror so I could fix it again. When I stretched my arms up to fix my hair it struck me suddenly that they were rather pretty if they weren't scarred. It interested me to discover this so I looked at myself closely. I had never really looked at myself before—there were a few good points, and a great many bad ones, but what I noticed was my general build. On account of what had happened when I was young I had quite decided I would never get married, but my form as I looked at it that day did not seem to me to belong to a single woman. To myself I looked quite matronly, and when that idea occurred to me I thought of babies. Then a feeling came over me that that was what I was missing, and the worst of it was that I could



see no way out of it. I could not marry—I had not got far enough then to think of having a child without getting married—and oh, I felt so bitter. I was feeling things, but could not tell what I was feeling. My head began to ache. I would not stand it. I took the razor, I thought a moment, then I opened my waist and cut over the left breast as deeply as the razor would go in, and then I laughed.

“The next time Dr. ——— cut my arm for me I do not remember how I felt. He opened a vein.

“Then another time I had another crazy headache. I had tried hard to control myself for about four days, but I had a fight at home, my mother was nagging me. I had a hysterical fit, or something like it. I was discouraged. I cut myself with a safety razor-blade four times on the left arm before it brought any relief. I did not go to a doctor to have my arm attended to—I was afraid.

“The next time I was with Y—and he would not believe what I told him, so I took up his knife to show him. I just stuck it into my arm, he wouldn’t let me rip the scar open. I was indifferent. I felt still and baffled. I knew that I must give up the idea of having a child, and it hurt, but the pain was numb.

“Then to please Mrs. X—I tried hard not to cut myself again. I knew that I must not bother her because she was always so busy. I did not do it for about two months when I got that feeling again. I thought that if I could see her I would be able to control myself so I telephoned to her. She was not in. My mood changed, I did not want to try not to cut myself. What was the use, nobody cared. I was most unreasonable. I bought a knife and went to ——— and cut myself on the wrist. Then I was sorry, because I knew she would not like it, and because I felt I must tell her. I had not told her that I cut myself at times but I think Dr. ——— had. I told her that night, she bandaged my wrist, and for the time I was almost happy, only still there was a miserable feeling left.

“After that I studied with ——— for quite a while, and also learned to control myself. I did not cut myself for about eight months I think when I broke out again, then I cut myself internally. I just pushed the knife, and made some kind of a gash.<sup>3</sup>

<sup>3</sup> In her vagina.

It was about three o'clock in the morning. I had had such bad dreams, and my head ached so, and that still feeling was there. I tried not to blame anyone for what I was, but still I felt that if I would only menstruate I would be all right. The thought maddened me, so that I got up and got my penknife and did it. After I had cut myself I realized what I had done. I knew I would be lucky if I escaped blood-poisoning, but still in a way I did not care.

"At various times after that I cut myself. By that time I was so indifferent to and contemptuous of myself that I did not care. Sometimes I was sorry. Other times I was hard and cynical. I want one thing understood. I have never been of a pessimistic nature, unless one could say I was pessimistic about myself. The feeling I always had whether I had a headache or not was: What does it matter? Nobody cares enough to stop you. Of course there were people who did help me."

It is of interest to note some of the omissions in this somewhat "official" report she gave me. In the first place she does not tell how she happened to cut herself the first time. She suppressed the account of the assault. She did this to shield the man. But more important still is her avoidance of any mention of her "trial marriage" with the man who cared for her; its disastrous effect on the man who wanted to marry her; and the cutting on her leg of the letter W.

In the above account given by the patient is clearly seen her desire for surgical interference.<sup>4</sup> This desire to have the surgeons probe and operate may surely be said to be masochistic. Thus, whether one calls the case as a whole, a case of masochism, or not, there is plainly a strong component of masochism in it.<sup>5</sup>

<sup>4</sup> The relation of this desire to the incest impulse, or, in more general terms, the "father complex," is obvious. See Freud's "Three Contributions to the Sexual Theory," *Nervous and Mental Disease Monograph Series*, No. 7.

<sup>5</sup> Cf. Dr. Paul Federn: "Beiträge zur Analyse des Sadismus und Masochismus," *Internationale Zeitschrift für Ärztliche Psychoanalyse*, I Jahrgang, Heft. 1, S. 29. Also, Havelock Ellis: "The Psychology of Sex," Vol. I, p. 66.

## EPICRISIS

This case has interest for a number of reasons. In the first place it is doubtful if one could call it purely hysterical.<sup>6</sup> There is no splitting of consciousness in the sense in which hystericals split their consciousness. The psycho-sexual traumas of childhood are repressed, but are also remembered. Even so, they are all-powerful. This proves that such traumas do not have to be forgotten to have an abnormal influence on the psyche.

In another way, however, the patient shows a closely similar reaction to that of an hysteric. She was unable to bear mental distress. The hysteric represses his unpleasant memories because they cause him mental distress and he is morally faint-hearted.<sup>7</sup> There are two kinds of courage or endurance:<sup>8</sup> the ability to bear spiritual distress or agony, and the ability to bear physical pain. The patient was not afraid of pain, but she was unable to bear mental anguish. To a certain extent she *chose* pain. Here she was imitating, in her own acts, *both* her father and mother. Her father used to beat and otherwise maltreat her mother; but her mother never struck back, or resented it. She could bear anything, in pain. On the other hand, her father could not bear the slightest pain without creating the greatest disturbance. To the patient, bearing pain increased her own self-respect, as contrasted with her father, and identified her with her mother; while in inflicting pain she satisfied her aggressive masculine impulses and identified herself with her father. In another respect the patient was very like an hysteric. She carried on an active process of day-dreaming, of fantastic creation, all having to do with babies, homes, and husbands. Night dreams, too, were of the same subject, though less idealized.

<sup>6</sup> Freud: "Selected Papers on Hysteria," p. 29, Monograph Series, No. 4.

<sup>7</sup> If the patient had not been so conscious as to why she cut herself the case might have been called a compulsion neurosis. Following Freud one might call it, however, a retention hysteria. But *classification* is less important here than *causation*. Cf. Freud: "Bemerkungen über einen Fall von Zwangsneurose," *Jahrbuch für Psychoanalytische und Psychopathologische Forschungen*, 1909, Bd. I, Hft. II, S. 357; and Jones: "Einige Fälle von Zwangsneurose," *Jahrbuch f. Psychoanalytische u. Psychopath. Forsch.*, 1912, Bd. IV, Hft. I, S. 563; Freud: "Zwangshandlungen u. Religionsübung," *Sammlung kleiner Schriften zur Neurosenlehre*, S. 122.

<sup>8</sup> Cf. Plato: "Laches."



There is a further interest attaching to this case because no special technique was required to gain the facts above recounted. Simply questioning the patient sympathetically and urging her to answer when she was reluctant to do so, sufficed. This follows, of course, as a corollary to the absence of an actually split consciousness. It is when the complexes are unknown to *both* investigator and patient that a special technique is necessary for getting at the facts. In this case, the facts were known to the patient, though, naturally, she was reluctant to tell them. The interest therefore shifts from the technique to the facts and their relations.

The objective fact is the cutting. This is too complex to be merely impulsive, it is the end result of a process of thinking, motivated by feelings and impulses aroused by the repressed memories of early sadistic and perverse treatment. One could conceive that the sexual craving of the patient was abnormally developed<sup>9</sup> by her early passive masturbation.

Before going on to a more detailed analysis I wish to emphasize two points of much significance: This case may be looked at from two points of view: (1) It is a scientific study of the cause, or causes, of the cutting. More rigorously stated, perhaps, it seeks to show the "indispensable condition" without which the cutting would not have occurred. (2) It tries to suggest, because more than suggestion is impossible, the therapy, and its success. In the actual work these two processes are inseparable; in the paper I wish here to point out the possibility of discriminating these two viewpoints. For this patient, there is no doubt, but that the "indispensable condition," for the later self-mutilation, was the psychosexual trauma of childhood. To prove this to be the fact for all cases of self-mutilation would require the psychoanalysis of a great many cases. I have had two other cases, however, in which I can demonstrate the same etiology.

Roughly, the cutting may be analyzed into five parts: (1) The pain; (2) the bleeding; (3) an aggressive act leading to (4) surgical and sympathetic treatment; (5) sexual relief through symbolical masturbation.

Pain alone is an insufficient motive. If it had been merely pain

<sup>9</sup> Freud: "Selected Papers on Hysteria," p. 159, Monograph Series, No. 4.

that the patient wanted she could have gotten it in many ways, more intense and not so destructive. But there was the pleasure in pain if it were not too intense. Freud says, "it has also been claimed that every pain contains in itself the possibility of a pleasurable sensation. Let us be satisfied with the impression that the explanation of this perversion is by no means satisfactory and that it is possible that many psychic efforts unite themselves into one effect."<sup>10</sup> This multiplicity of motives has been found to be the case with the patient. Whether it is so generally could only be determined by the psychoanalysis of a great many corroborative cases. In the case under consideration, however, the pain element in itself may be regarded as almost negligible, but through association with her passive masturbation it gained tremendous power.

Thus cutting was a sort of symbolical substitute for masturbation. At first when she was masturbated it caused a good deal of pain. Hence pain and sexual stimulation were intimately related. Another motive for her painful self-mutilation was a desire to escape mental distress. Physical pain distracted her attention and was a means of escaping such distress. She also felt disgusted with herself and wished to punish herself, in a way, for her acquiescence as a child in what she instinctively felt were serious misdeeds.

The patient said she had masturbated herself only once, and never did so again because of the loathsome memory of what her uncle did.

Bleeding, as a means of medication, has a long history. Perhaps here we may get a glimpse of one of its roots. In the patient, bleeding had several psychic determinants. In the first place there was the desire for regular menstruation. The menses had always been irregular, and after the patient began cutting herself, she said she cut herself every four weeks. This correspondence to the catamenia period is obvious. The idea of vicarious actions bringing about a desired end is very primitive.<sup>11</sup> From this point of view the pain element in the complex act would be a barrier to be overcome before the cutting could take place. The

<sup>10</sup> Freud: "Three Contributions to the Sexual Theory." Trans. by Brill, p. 22, Monograph Series, No. 4.

<sup>11</sup> Cf. J. B. Frazer: "Golden Bough"—the chapter on Sympathetic Magic.

desire for regular menstruation together with other desires must overcome her aversion to pain. This desire for menstruation was also rooted in a desire to be like other girls and to function like other girls. Here the power of the herd instinct is suggested.<sup>12</sup> Bleeding also occupied a peculiar double position in the mind of the patient. First it symbolized menstruation, and second it seemed a direct way of reducing her obesity. Her dislike of obesity also had a sexual ground. At about the age of seventeen she was so fat that some of the girls in the factory thought she was pregnant and used to taunt her with it. As it was a common thing for these girls to live loose lives there was nothing strange in their suspicions. Luckily, she said, she never lost a day at work during that year, otherwise the girls would have thought she had had an operation.

The third part of the analysis of the cutting concerns itself with the act as an aggression. From this point of view the act is masculine. This corresponds completely with a large part of the patient's character. She is decidedly masculine in many ways. Physiologically and psychologically the bisexual character of man and woman is established. Hence the right to say that the patient, as a man, committed an act of aggression, against herself, as a woman, thus following the double law of her being. Thus her sadistic impulses, probably strongly inherited from her father, got satisfaction while she satisfied at the same time her masochistic inclinations, inherited from her mother. Masochism, therefore, in this case at least, so far as it may be said to be masochistic, has a sadistic component. Similarly, sadism, in so far as others are really part of ourselves, has a masochistic component. This patient had strong sadistic impulses as was shown by her desire to kill her uncle and also to kill her father. These impulses, however, were repressed, or perhaps better said, were introverted, to use Jung's phrase, and thus became masochistic. Thus one fundamental root of masochism may lie in sadism. Certain oriental peoples kill themselves, thinking thereby most seriously to harm their enemy. So the patient sometimes cut herself, she said, to hurt her father.

It is worthy of note that any act of conscious aggression,

<sup>12</sup> See Bernard Hart: "Psychology of Insanity"—quotations from Trotter's "Herd Instinct."



whether directed inward or outward, implies the *overcoming* of certain psychic barriers such as pain or fear of reprisal. It must be a strong impulse which overcomes a strong resistance. Next to complete self-destruction comes partial self-destruction as the strongest deterrent possible to certain acts. On the other hand, the will to live a *full* life is perhaps almost as strong as the will to live at all. The patient's desire to live a full life is shown by her almost overwhelming desire for children, together with a strong desire to associate with, and receive consideration from, people superior to her inherited social environment. These various components of a complex total force were of course not clearly recognized or known. It was the work of psychoanalysis, just as the word implies, to analyze this complex into components and present them clearly to consciousness for consideration, judgment, and control. This necessary function of psychoanalysis implies an ethical and philosophical foundation. In this respect it is interesting to note the close correspondence between the psychoanalytic theories and the Bergsonian doctrines.<sup>13</sup> Here too should be mentioned the work and doctrines of William James.<sup>14</sup> But this paper is no place to develop these suggestions so they must be merely mentioned.

Finally, as to therapy, and its results—Freud says, in the paragraph on “The Psychic Participation in the Perversions”: “The omnipotence of love nowhere perhaps shows itself stronger than in this one of its aberrations.”<sup>15</sup>

It was assumed that the patient had considerable psychic power, only introverted. She was encouraged to believe in her own capacity. Each step in the analysis was explained and discussed with her. She was told some of the theories and was asked if she corroborated them in her own feelings and thoughts. If not, they were revised to fit the facts. In this way she analyzed her own complexes and thereby gained much self-control. And, most important of all, opportunity for sublimation was obtained for the patient and she was given a chance. Nothing could be less helpful than two courses which might have been followed.

<sup>13</sup> Cf. Bergson: “Matter and Memory” and “Creative Evolution.”

<sup>14</sup> James: “The Will to Believe”; “Principles of Psychology”; and “The Varieties of Religious Experience.”

<sup>15</sup> Freud: “Three Contributions to the Sexual Theory.” Trans. by Brill, p. 24, Monograph Series, No. 4.

A complete analysis, left there, would have been of little help to the patient, if she had been given no chance to sublimate or idealize her energies. Because she was poor, of lowly origin, and uneducated, it was necessary to provide such opportunities of idealization as would be unnecessary to more highly favored patients. Strictly speaking, this is not a function of the analyst, but like the doctor who prescribes a medicine too expensive for the patient and therefore must get it himself if it is absolutely necessary, so the analyst, if he wishes his work to last, must provide an adequate outlet for energies which, turned in, are self-destructive.

Another course which would have been not only futile but actively harmful was also avoided. I mean the assumption that what the patient was suffering from was lack of specific sexual satisfaction and advising sexual relations or masturbation. Such a course could only end in disaster. The reason is unassailable. The patient, herself, had already sublimated her sensual desires sufficiently to know that what she really wanted was children and not the sexual act merely. Hence only the highest ideals of love could satisfy, even approximately, her cravings and desires. Anything less than this could only throw her back into the childhood degradation, out of which she had already partially climbed.

So far the patient has responded to the treatment. While fourteen months, without a relapse, is too short a time upon which to base any prophecy of the future, yet it does give a certain ground for hope.

## BLINDNESS AS A WISH

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A healthy man awoke blind on July 24, 1912. He had slept well but insisted that it was still dark and that it was not time to get up. He had had no previous trouble with his eyes, had worked as usual the day before; and he had absolutely no physical symptoms before, at the time of, or after the blindness to account for it. He was thirty-nine years of age and always in the best of health; his heredity was good, he had had no previous illness, and denied syphilis. For fourteen years he had worked in a factory without missing a day, he did not know of any other person there who ever had any similar trouble; and nothing in the nature of his work could be held responsible for his symptom.

During the ten weeks from July 24 to October 4, repeated examinations failed to show any lesions in any part of the body. Drs. Mittendorf and Holden pronounced the fundi and pupils normal; there was slight perception of light but no perception of objects.

At the Neurological Institute, on the service of the Third Division, on October 4, physical examination failed to show any lesions of the nervous system. The Wassermann tests of both blood and spinal fluid were negative, and there was no increase in the number of cells in the spinal fluid. Tests for vision showed a distinction of light from darkness but no vision of objects. He was led about by the arm and did not feed himself.

Since no physical abnormalities were found, and since no disease is known which can produce a sudden blindness in both eyes without other symptoms and some demonstrable physical condition, this blindness was considered to be either feigned or hysterical. Feigning was practically excluded for two reasons: he had no insurance of any kind, had sustained no injury whereby he could expect remuneration, and by being out of work, he ex-



posed himself, his wife and three children to want; and all the many tests which were made with the object of getting evidence that he could see were unsuccessful.

The only remaining assumption was that his blindness was hysterical, which assumption four days later was proved correct, since vision returned as suddenly as it had been lost.

According to some modern conceptions of hysteria, all physical manifestations of hysteria are the expression of some purposive mental actions. In the analysis of hysterical symptoms, therefore, the object in view is to determine what particular volitional act stands behind them. The problem in this case, then, was to determine what there was in the man's mental life that made vision undesirable: what situation he did not wish to meet, or what person he did not wish to see; and, finally, to ascertain what he gained by the non-use of his eyes.

A patient cannot be asked these questions directly, for he would say it was an absurdity to think that he could, for example, gain anything by being blind. Most people do not realize what effect their own worries and personal affairs have upon them, and of course such people are not to be expected to answer such questions immediately or freely. Others are fully cognizant that they have troubles but they are unwilling to admit them to outsiders; and still others are unwilling to admit to themselves that their troubles actually affect their behavior. It has been shown, however, that such a relationship exists between thoughts and actions. In his admirably written book on "The Psychology of the Crowd," Gustave Le Bon expresses this relationship when he says that "behind the avowed causes of our acts there undoubtedly lie secret causes that we do not avow, but behind these secret causes there are many others more secret still, which we ourselves ignore. The greater part of our daily actions are the result of hidden motives which escape our observation."

When such a difficulty exists in obtaining a patient's real idea-tion, it becomes necessary to resort to other than the direct methods of questioning. This patient had at first denied any emotional upset which might act as a cause of his blindness, so it became necessary to employ indirect methods to get him to talk. As he had casually volunteered the information that he always had dreams and was willing to talk about them, his dreams

were used as the subject of conversation and he alternated between the substance of the dreams and the actual events of his life which seemed to him so analogous to the events of the dreams that he gradually spoke of incidents of his life which were personal and intimate, and which he had never talked about before. In the unraveling of a dream about a quarrel, he stated that he was not a man to provoke quarrels, and that although he had gone through fifteen years of a marriage which was unhappy for him he had always controlled his feelings by day; but he found himself, to his discomfiture, always fighting at night in his dreams. In discussing some dreams about winning victories while fighting, he said that the fights had assumed a victorious nature only after the onset of the blindness, and he was quite willing to believe that some element in the blindness was responsible for this change in the character of his fighting dreams.

Then he admitted, not only to the doctor, that before his blindness he had often wanted never to see his wife again and that since its onset he had felt really glad he could not see her even though she was near him; but he admitted also to himself as well as to the doctor that his blindness coincided with his wish not to see his wife. Straightway he perceived that there were other avenues of escape from her than the one along which he was traveling, and which would offer him fewer inconveniences. Then his blindness instantly disappeared.

The following dreams were the means by which the patient came to understand the course of events. The first one is:

*He went into a drug store and became engaged in an argument with the druggist, getting so angry that he threatened the druggist with a law suit.* As a matter of fact, he said, no such incidents had ever occurred. He was not in the habit of going to drug stores and did not know any druggist. However, he had often thought of going to a drug store to buy some poison to end his life, because his home life was unhappy. Six months after his marriage he found that he no longer loved his wife. During the following fourteen and a half years he just endured her presence, always with a never-relieved, pent-up strain; for he thought that it was not a man's privilege to quarrel with a woman, and that it was his duty to stay by his wife. He claimed that although he

had often wanted to, he had never become harsh or angry at her. So he considered poison as his solution of his difficulties.

The appearance and actions of the druggist of the dream suggested to him not any special druggist but the man who, as owner of the factory where he worked, was responsible for the recent loss of the position he had had fourteen years. This man had for some time accused him of being attentive to a woman in the factory, and finally caused the patient to leave the factory. He was absolutely innocent of the charges. As he realized there was nothing to be gained by a quarrel with his employer, he quietly secured a position in another factory, where he had similar work. When he told his wife truthfully why he changed his position, she, too, took up the accusations, and also charged him with improper relations with several other women. He endured these "torments"; he had no friend to whom he could turn for advice; he knew of no one to whom he would trust the story. He tried to bottle up his emotions, he said, and during the day he held himself in the grip of self-control, but it bothered him to find that at night, in his dreams, he did not control himself and that the fights continued.

He had never been involved in a law suit and had not even threatened anyone with one. He said he did not know why he should threaten either this particular man in the dream or the factory owner with any kind of a lawsuit; nor did he know why the subject of a suit should be brought up at all. But on considering what person could become involved in a suit or what person there was from whom any gain in a personal way could be obtained through a suit, he said he had sometimes thought of the relief he might get if he had some grounds against his wife so that he could file a bill for divorce and be freed from her "torments." He thought a divorce would free him from his troubles just as poison would.

If we now look at this dream with the idea of finding the wish therein contained, as Freud maintains there is in every dream, we see in its various parts, as the patient very readily saw, wishes which he had had but had not admitted or carried out. His waking wishes had been to go to a drug store for poison with which to end his troubles; his dream took place in a drug store. The dream gave him the opportunity of becoming angry and threaten-



ing a law suit, the thing which if directed and carried out against his wife would free him just as the poison would. Of the two solutions for his troubles which he had thought out for himself, poison or divorce, the dream contained a combination, using the place which furnished poison as the scene and the anger leading up to the threat of a law suit as the main theme of the dream story. The dream gave the most prominence to the threat of the law suit, indicating as the patient said, that the law suit was the most desirable solution of the troubles.

There is in this dream, too, another phase, which illustrates Jung's theory that all persons in a dream are representatives of components of the dreamer's personality. The patient always maintained his innocence of the accusations made against him in regard to women, but said that he had often wished he did not have the sense of faithfulness to his wife, especially when he knew that this factory owner, also a married man, was himself the one who was attentive to the very woman to whom he was accused of being attentive. This man used a freedom which the patient desired but did not take, and in this dream the quarrel with this man is analogous to the struggle he had constantly with his own desires for freedom and in this way is representative of that phase of his character with which he was always fighting.

The next dream, one he had after coming to the Neurological Institute, is as follows:

*He starts an automobile going, but after a short distance it stops and drops to pieces. He tries to put the pieces together.*

Nothing like this had ever happened to him; he had never started, driven or put together an automobile. His only acquaintance who had a car was this same factory owner, who had promised but had never given him a ride. On seeing the machine in the street the patient had often jokingly spoken of starting it up and taking a ride; and of course he did not expect to go in the machine now, as he was no longer in the employ of this man. When he lost his old position six months before, he had to drop down from the salary which had been increased occasionally during the fourteen years he was there, to small wages in the other factory. With this decrease in pay, his plans for the payment of his recently built house were seriously interfered with. He feared he might lose the house. His pay was for piecework and when

he became blind his pay stopped. He had no health, life, or accident insurance, and he had no intention or reason, he said, for claiming damages from his employers.

His greatest concern was not, he maintained, his financial stress. He had built a new house, believing that if he and his wife were to live together, a new and common interest might bring them more contentment. She seemed, however, to take no interest in the house or in the payment for it, and continued in her unjust faultfinding and renewed the accusations. He was completely discouraged, and now he was blind.

After this recital of his affairs, he saw instantly that what he had been telling was another version of the story of his dream. The actual details of the dream had not occurred, he said, but things very similar had taken place, when all his plans for his financial and domestic schemes fell through. He said he was just at the stage in his real life that he was in the dream when the automobile dropped to pieces, and he did not know what to do until he got back his eyesight.

If Freud and Jung had done nothing more than to demonstrate that in every dream there is a wish, they would have contributed much. In this short dream about a man starting something going, and his attempting to fix it up when it dropped to pieces, no other wish can possibly be conceived than that he is trying to put together something that once existed. The patient maintained he was trying to recover the use of his eyes so that he could again take up his work.

The next dream is the most significant for two reasons: it brought forth material not previously ascertainable, and by means of which the blindness was removed; and it was a repeated dream, one which came six or eight times before the blindness, and after it, fully fifteen or sixteen times, changing in its termination from the moment of the onset of the symptom.

At first the dream was as follows:

*He got into a fist fight, but as he tried to strike his fist fell short and he hit nothing. He awakened with a feeling of defeat.*

He had never had any actual fights. The only provocations he had had were with his wife, and this factory owner, and he had always endured their talk and actions without retaliating.

He had neither the courage nor the desire to fight them. It was his wish and intention to be defeated in such affairs.

After the onset of blindness came this change:

*He got into the same fight and when he struck, his fists always hit so hard that he came out victorious. He awakened with a distinct feeling of victory.* The man commented instantly about the sudden change in the dream at the very onset of his blindness, and volunteered that if there is any significance in dreams at all, there must be some special reason for a change in a dream which came so repeatedly; and moreover that if there was a special reason for such a change and this change came at the onset of his blindness, he was convinced that his blindness had something to do with that reason.

Then he reluctantly told of the events of that summer. He had had an offer of a good position in the West and after several weeks deliberation, refused it. He did not tell his wife of the offer. When in July she continued in her ways, he reconsidered the offer, and on the 23d of the month he made up his mind definitely to take his three children and go away without her knowledge, and never see her again. This definite decision startled him. He had for the first time taken a step against his wife. He was astounded at himself that he could break away from the principles he had had all these years. Perturbed, he finished his work that day, but he slept well. He woke up the next morning blind. He was of course unable to go away, but he no longer saw his wife; it was not altogether necessary for him to go away.

For the first few days he was terrified. Later, in spite of the discomforts of being blind, he found a very definite comfort and almost a feeling of secret joy in not being able to see his wife. Never before in these fourteen years had he had this feeling of comfort when she was in his presence. This was a victory, he said, which was very definite to him, so definite in fact, that he was sure that this was the feeling of victory he had in the dreams, and which caused the dream termination to change from defeat to victory.

These admissions were not all he had to make; they came quickly, once started. Shortly before his entrance to the Institute, he believed as he now thought of it, that his wife had be-



come a little more kind to him and seemed to antagonize him less than she did before he was blind, and even less than she did in the first weeks of the blindness. His blindness had not only been a source of satisfaction and gratification to him in preventing him from seeing his wife, but it had brought about a change in both their attitudes.

On this realization that his blindness was the expression of his desire not to see his wife, and that by being blind he gratified his desire and had also effected a change in her attitude toward him, the idea occurred to him that if all he wished was not to see her, he could find less inconvenient ways than by remaining blind. Instantly the blindness disappeared. He picked up a newspaper. He read it. It was four days after his entrance to the Institute. A day or so later he wrote a letter to his wife saying he was coming home. Furthermore, he said, he went willingly.

# THE TECHNIQUE OF PSYCHOANALYSIS

BY SMITH ELY JELLIFFE, M.D., PH.D.

## PREFACE

The traveller in a foreign land who keeps to the main highway needs no guide. He does not even have to know the language of the country for a judiciously distributed *pour boire* will put him in touch with all the more common requirements of the situation.

With his Baedeker in hand, he may even wander about in strange surroundings oblivious to the unknown *claque* about him and return to his haven of safety with an outline of the topography of the city, its bricks and mortar, and possibly its trolley cars.

But were he to go into the by-ways, were he to reach out for an understanding of the rich life that is actually being lived about him, he is more or less shut off, and deaf and dumb must needs grope about if without knowledge of the language of the country.

The doctor of medicine is in some such position—his unexplored countries come to him, however, rather than his going to them. His Baedekers—Gray, Osler, and perhaps a rich library, furnishing the details of many complicated structures—lead him through the more frequented paths of disease processes, but, like the real traveller he not infrequently finds himself lost in unexplored territory. A new language strikes his ear at every specialistic frontier that he would pass; a rich and apparently hopeless terminology has to be mastered if he would travel in new fields, and if he would know what is going on over the boundary he must make it a part of himself.

It is of no service to him to rationalize his indolence by calling this speech new-fangled, absurd or unnecessary. To shut his eyes and ears to these new languages, refusing to learn them, only hampers himself, and the stream of active intelligence goes on leaving him in an eddy of his own isolation.

Words are only tools to be used to cut into the facts of nature, so that fellow workers can make a concerted effort, through mutual understanding, and clear a pathway into the secrets of life. The simplest act of reflection will show that the more complex the situation, the greater will be the confusion of new tongues and the greater will be the need for the construction of new tools—words—to aid the explorer. This is why the problems connected with the study of mental activities have so rich a terminology and one constantly undergoing evolution.

Bones, tendons, muscles, intestines, hearts, lungs, have been much alike for countless centuries, and have modified little in their structures, but the nervous system, an active, changing master-spirit in evolution, is constantly reaching out in its attempt to grasp the infinite.

Even the simplest aboriginal inhabitants of an Australian village are giants in mental development when compared to the earliest products of the age of man. Historical retrospect can but imperfectly reconstruct the stages of primitive culture, but the connecting links between aboriginal and modern races are there. The ethnologist, the archeologist, the anthropologist, the student of language, of customs, of laws, of religions has a rich material, and already the data available for the understanding of the development of civilization and of culture surrounds the student of human nature in bewildering profusion.

The races of the twentieth century are partakers in this heritage of a bountiful past and the individual of to-day is its product. To be completely understood entails a knowledge of the principal gifts of this inheritance, and he who would grasp the innermost causes that sway the human mind must be able to reconstruct the stages through which that mind has come in its development from primitive culture to modern conditions. "What are we," queries Bergson, "in fact what is our *character* if not the condensation of the history that we have lived from our birth—nay even before our birth, since we bring with us prenatal dispositions?" "Doubtless we think with only a small part of our past, but it is with our entire past, including the original bent of our soul, that we desire, will, and act."

These "prenatal dispositions," this "original bent of our soul" are a part of the inheritance of which we speak. Everything in



human life, individual as well as social, has then its historical background, its origin, its life history and thus its adequate working interpretation. Nothing is trivial, nothing is fortuitous.

Psychoanalysis outlines the task of interpreting human motives from this point of view. How; it will be my privilege to more fully set forth.

### INTRODUCTION

The present series of articles is planned for the beginner in psychoanalysis. They therefore will contain little that the trained analyst does not already know. If because of their simplistic character they prove of service to the neophyte my purpose will have been accomplished.

At the outset it seems desirable to give a general outline of what psychoanalysis is. For this a bare definition will not suffice. The word itself is almost as indicative as such a definition might reasonably hope to be. Psychoanalysis is primarily to be considered as a method. As such, it seeks to establish a knowledge of the development of individual human motives. Just as a chemical analysis serves to determine the ultimate composition of this or that substance present in nature, so psychoanalysis has for its task the unravelling of the ultimate causes of this or that manifestation of human conduct. Psychoanalysis then is merely a tool, just as chemical analysis is a tool—both are methodological disciplines working with different facts of nature, each seeking to determine ultimates in their respective spheres; the former dealing with data of that portion of the nervous system functioning to adapt the individual and the race to reality, the latter working with the inorganic and organic substances making up a large portion of that reality.

Not to extend this particular analogy too unduly, it may be added that inasmuch as chemical analysis is restricted only in its choice of material, so psychoanalysis need have no barrier for its activities. It is not a method limited solely to the solution of problems of psychopathology any more than chemical analysis is confined to the study of pathological human substances. All of the questions arising in relation to psychological activities may be investigated by the psychoanalytic method.

It seems to me desirable in this place to clearly emphasize the

fact that in psychoanalysis we are dealing solely with a method for gaining data since one frequently hears the statement that psychoanalysis is nonsense. A method, or a tool, is not nonsense. Chemical analysis is not nonsense, although bad quantitative or qualitative chemical methods may lead to false or nonsensical results. The individual chemist may be badly trained in his methods and be a poor chemist. This does not invalidate the methods of chemistry. Again certain substances may be so complex in their structure as to defy even the best chemical methods at separation and identification; this argues only for the comparative crudity of the known analytic resources. It can readily be conceded in an analogous sense that the psychoanalytic methods now developed may be comparatively crude, but this only supplies a motive for their betterment rather than an argument as to their falsity.

The crudities of those social instruments, the law and medicine, are known to all men, but only the sick egoist argues to do away with all law and all medicine. Those healthy nervous systems capable of adaptation to the realities of nature are endeavoring to improve law and medicine. They seek to minimize their crudities and make them better instruments for the obtaining of human happiness. In this, as well as in many another task, the methods of psychoanalysis are destined to play an enormous rôle in the near future.

In this place, I can only indicate some of the fields of activity in which psychoanalysis, as a method, has already rendered important service, leaving for future consideration, when I hope to present a summary of the development of the method, the more complete statement of its spheres of operation.

It is chiefly in the realms of psychopathology that psychoanalysis first showed its value; those chapters in medicine devoted to the study of the neuroses and psychoneuroses having been entirely remodelled by its application. In a similar manner the understanding of certain of the psychoses, particularly schizophrenia (*dementia præcox*), paranoia, and the manic-depressive group, is undergoing marked transformations as a result of the psychoanalytic methods. That large chapter of alcoholism which is not an object of interest to medicine alone, but enters into almost every sphere of human life, is having most penetrating and

far-reaching light thrown upon it by the students of the psychoanalytic school.

A new science and application of pedagogy are being reared upon the data obtained by psychoanalysis, as witness the masterly work of Pfister recently published and made the forerunner of an important series of works on pedagogy under the leadership of Meumann and Messmer.

The students of history, anthropology, ethics, religion, philosophy and art are beginning to feel the value of the material obtained by the methods of psychoanalysis, and already a shift of position with better generalizations is making itself apparent.

It is not my purpose, however, to sketch any such ambitious program in these pages. I shall content myself with the rudiments, and shall deal more particularly with simple medical problems; with such as are met with by the average practitioner, or those that come more indirectly to the student of nervous diseases.

I believe that every sincere practitioner can practise psychoanalysis just as he can practise surgery. In the latter case, with a fundamental knowledge of bacteriology he may cut just as far as his anatomical knowledge and experience permit him. He may limit himself to minor surgery, or he may attempt more difficult and complicated operations. So with the methods of psychoanalysis, if the practitioner will make an earnest attempt to understand them, he will be enabled to be of enormous service even when only using the simplest fundamentals. There are numerous sick individuals who do not need a complex analysis, because they have not developed a complex neurosis. Such can be relieved or cured by the application of the rudiments of psychoanalysis. This is particularly true in the pedagogic field working with developing children. On the other hand, it is important for the general practitioner to know that the complicated cases need a more complete grasp of the methods, just as an operation upon the brain requires more than a general knowledge of the principles of minor surgery.

The statement that we are dealing solely with a method, however, is incomplete—it is necessary to ask what is the method intended to do? and furthermore why is a special method needed?

I have already said that by psychoanalysis one seeks to establish a knowledge of the development of human motives, that all of



the psychical activities may be investigated by its means, and that it deals with data of the psychic life in its function of adaptation to reality. It thus seeks to establish a basis for the understanding of human conduct.

Such broad statements, however, are entirely too general, especially for the purposes I have in mind in these pages. We shall limit them here more particularly to the individual principles of human behavior, especially in their application to definite medical situations. The psychoanalytic methods which will be here outlined then will bear solely upon practical medical problems confined within comparatively narrow bounds. We intend to learn by them why certain symptoms of disease come into being, and what the meaning of these symptoms is for the individual's adaptation. We may then be in a position to properly estimate the *modus operandi* of the disorders under discussion and may possibly eliminate or modify them for the benefit of the sick individual.

And why is a special method needed? This latter question can only be answered completely after a more extended review of the situations which are to be analyzed. It can be stated here broadly that medicine had not been able to satisfactorily explain the import of many so-called nervous symptoms. The hypotheses were inadequate. Many, in fact most of them, proceeded along lines of chemical analogy.

Pituita, black humors, perverted chemism, faulty metabolism, auto-intoxication, indicanuria, etc., these are links in a long historical chain of such interpretations, the incompleteness and unsatisfactoriness of which have been demonstrated for thousands of years. Such an interpretative formula might attempt to explain why an individual with an incipient schizophrenia, for instance, should believe that it was absolutely necessary for her when going up a pair of stairs "to go three steps and then stop or else suffer from constipation." It would say that it was due to gastro-intestinal fermentation, possibly a parathyroid hyperactivity, or a deficiency of hypophysis secretion. For the sake of discussion it may be admitted that possibly such a disease as schizophrenia may arise from one or other of these or analogous metabolic disturbances, but even so wherein does this knowledge aid in an understanding of the "three steps or constipation" symptom?

Perhaps the symptom is meaningless and neither needs nor can obtain an explanation. This attitude of mind can be understood. It is an old point of view. It has permitted just the type of organic explanation. On the basis of the nonsense of the symptom we get a still more nonsensical interpretation. But let it be assumed that the symptom means something, that it is as real as a dyspnea, and arises from necessary psychical antecedents, then at once it becomes apparent that "auto-intoxication, perverted metabolism," etc., as explanations are of no value; they must be abandoned.

This is all preparatory to saying that the content of an idea, a psychological fact, can never be explained on the basis of perverted chemism, and that every idea, for we shall deal with ideas—mental facts—has a basis which is as absolutely determined as any other reality of nature.

This fundamental postulate that every psychological fact is a bit of nature with definite laws is the reason why a new method of investigation had to be found. The chemical, bacteriological, pathological laboratories had shown their sterility in this particular field of enquiry.

Even recognizing this bankruptcy, so to speak, of organic explanations for psychological phenomena it may be further recalled that psychology itself has been far from being a promising guiding principle. There have been a number of reasons for this, but two psychological tendencies, which had received the official sanction of the schools, may be touched upon since the psycho-analytic method has shown their inadequacy for its particular problems.

For many years official psychology was limited to the so-called physiological psychology. This was practically little more than a detailed physiology of the special sense organs. Its study developed a mass of information relative to the receptors and the conducting mechanisms of the special sense organs, facts of great importance, but of little applicability in getting at explanations for human conduct.

Another important attitude of psychology was its insistence upon what it was pleased to call its "norms." The famous dictum that the abnormal in mental life could only be understood from a study of the normal has been one of the chief obstacles to progress.

Such an attitude of mind could only have come from the laboratory worker unacquainted with the progress made in the empirical biological sciences. For here the great advances in knowledge have come from the pathological side. The normal has been built up out of the pathological. Hence, when Freud, rejecting all of the dicta of the official and reigning schools of thought, constructed his psychoanalytic method upon pathological data, he followed the path of experience in the other biological sciences, and by avoiding the sterile psychology of the so-called "normal mind" founded a method of great value.

No previously existing system of thought could properly form a working hypothesis to explain why for this or that individual it was necessary for the patient to "go up three steps or else be constipated," or other analogous symptoms which will occur to the reader and which are found in abundance in all pathological cases, be they hysterias, or compulsion neuroses, phobias, schizophrenias, or what not.

The medical historian, acquainted with the various hypotheses, can see the thread of truth that runs through all of them. Each new century has brought better and better explanations, but it was only when, towards the Charcot era, a definite parting with structural concepts took place, that abnormal psychology gained a definite right to state to the student of normal psychology that it had to be reckoned with, and that previously existing systems of thought, even philosophies, would prove inadequate if the pathological data of medical science in the psychological sphere were neglected.

A method, therefore, which would bring together and unite into a genetic or dynamic concept these data of psychopathology was much to be desired. It saw its earliest systematic beginning in the days of Charcot, it remained for Freud to forge the tools of psychoanalysis, and make them of value for every student of psychical phenomena.

That same historian viewing human endeavor in his search of the absolute must realize that psychoanalysis, like other tools that *homo faber* has constructed, will undergo changes and developments. The very facts of nature that it reveals will cause it to be modified, and if it remain sufficiently plastic, it too can evolve.

It is no part of the present program to follow any dogmatic



presentation, but I would remind the reader that a simple statement of the outlines of the psychoanalytic methods inclines towards a certain amount of positivism which I would gladly avoid if it were possible.

### THE MATERIAL TO BE ANALYZED

A change of heart has taken place in many quarters of the medical profession with reference to the so-called functional manifestations of the nervous system. The neurotic is no longer to be jeered at and made fun of. "Truth from (their) lips prevails with double sway, and fools who come to mock remain to pray." That multitude of patients who "have nothing the matter with them" has commenced to be seen in its true colors. The members of that much greater multitude who have "so many things the matter with them," and who, as Dejerine very pointedly remarks, make up at least half of the practice of most specialists, will soon be seen, not in the light of sufferers in this or that organic realm, but as having beliefs in illness, which make them sufferers just as truly as those with "nothing the matter with them." When these truths become the universal heritage of the profession then the medical iconoclasts and jeerers, such as the likes of Pliny, Moliere and Bernard Shaw, will have lost an attribute of their vocation and can devote their energies to constructive rather than destructive criticism. At the present time, however, we need both kinds.

The first requirement of the analyst then is a sympathetic attitude towards his material. To pooh-pooh a symptom as "nonsense," as "imagination," as "silly," as "make believe," or "malingering" is an assumption which has no value from the standpoint of the understanding of the symptom. Such an approach to mental problems is rather an index of the naïveté and indolence of the assumer. These universal human attributes must be reckoned with and overcome. Thus the analyst becomes a good listener. This listening does not mean the turning of an indulgent ear to the complaints of the sufferer, but a comprehending and grasping curiosity that counts "nothing as trivial, nothing as fortuitous." The analyst must hunger for information about the patient's ills, being ever on guard against formulating interpretations before the returns are all in.

All this takes time!

In an opening Dialogue between Philopiro, a physician, and Misomedon, his patient, written by a Dr. B. Mandeville<sup>1</sup> some two hundred and fifty years ago, I find the following.

*Misomedon*: I have sent for you, Doctor, to consult you about a distemper, of which I am well assured I shall never be cured.

*Philopiro*: Whatever your case may be, Sir, it is a great Misfortune, you entertain so ill an Opinion of it; but I hope, your Disease may prove less desperate than your Fears represent it.

*Misomedon*: It is neither better nor worse than I tell you, and what I say, is what I am convinced of by Reason, and not a suggestion of my Fears: But you think, perhaps, I'm a Madman, to send for a Physician, when I know before-hand that he can do me no good. Truly, Doctor, I am not far from it: But first of all are you in haste, pray?

*Philopiro*: Not in great haste, Sir.

*Misomedon*: I am glad of that, for most of your Profession either are, or at least pretend to be in a great hurry, But tho' you are at leisure, Can you hear a Man talk for half an hour together, and, perhaps, not always to the purpose, without interrupting him? For I have a great deal to say to you, several Questions to ask you, and know I shall be very tedious; but if you can bear with me I'll consider your Trouble, and pay you for your Time, and Patience both. Can you stay an Hour?

*Philopiro*: Yes, Sir, or longer, if there be occasion."

From which it may be seen that in 1685 as well as to-day, the physician has failed to understand these patients, and has neglected to give *time* to their study. If the physician is unwilling to utilize a great deal of time he can never make an analysis.

Sympathetic insight, intense work in obtaining many statements of what are facts to the patient, oftentimes with innumerable apparently trivial, and unimportant details, and time, are the primary factors in the opening of an analysis.

This outline is a commonplace to the trained analyst, but I am here writing for the beginner, who wishes to obtain a working knowledge of a method. No other attitude of mind will bring any useful results. A beginner in chemistry who does not believe

<sup>1</sup> "A Treatise of the Hypochondriack and Hysterick Diseases in Three Dialogues." London, 1685.

there is anything in the atomic theory, that  $H_2SO_4$  as a symbol for something is nonsense, and that the two sides of a chemical equation convey no information as to what is going on in a chemical reaction is not likely to become a chemist and much less a competent authority on chemical problems.

Still another situation is in need of emphasis before we approach the patient. This is the subject of diagnosis. The young student is prone to pin his faith to names. They seem very definite to him. Hence he always seeks the diagnosis, and can then "consult an authority" or "read it in a book." He is prone to shut the book before him, the patient, and hear what somebody else says about something he knows nothing about, *i. e.*, this particular problem. The diagnosis of the mental side of the problem is an absolutely negligible matter for the opening of an analysis. One's object is to find out what is going on in the patient's mind. The interest should be concentrated on the correct ascertaining of the symptoms and on *processes*, not on *names*. All diagnoses, it hardly seems necessary to say, are purely artificial creations for social purposes. They represent useful generalizations for subsequent comparison and discussion with *others* later on in one's investigations. The attitude of mind that feels that its task has been accomplished when the patient is labelled—hysteria, compulsion neurosis, neurasthenia, etc.—will never grasp nor comprehend the living process going on within the patient. All enquiry stops when one dogmatizes at a diagnosis. The beginning student, therefore, should thrust the idea of the mental diagnosis aside for the more vital problems of getting the facts. Naturally the physical diagnosis, if there is one, is another question which will be taken up.

*Mental Facts.*—In obtaining the initial history of a patient, one's attitude should be an absolutely impartial and uncritical one. One should avoid all leading questions, and, in the words of Misomedon, one must be willing, yes anxious, "to hear a man talk for half an hour together, and, perhaps not always to the purpose, without interrupting him."

This "talk" may be hastily jotted down, or written in shorthand, or an effort made to remember it as one sees fit, which detail will be discussed later.

If one is not certain regarding a detail, the patient should be



asked to repeat, or explain further, or try to make it absolutely clear just what he means by the statement made. Thus, a patient says "everything must be clear."

(Just what do you mean; give me an example.)<sup>2</sup> "Why under the bed must be clear; the bed must be clear; the closet must be clear."

(How.) "Why I must spread newspapers under the bed, then I can see that it is clear. I must roll up the sheets, and the mattress, and then I am sure that it is clear. I put white papers in the closet and am sure it is clear."

(Why.) "Because I must make it clear that there is nothing there. No Booney (*i. e.*, negro) element there."

This may be as far as such a line of enquiry will take one for the time being, or one goes on to another symptom. In a very short time the analyst experiences the pleasant sensation that the patient feels that some one is really trying to understand what is going on in their mind.

It should be the analyst's endeavor, in getting the preliminary history, to listen with great care to the patient's own explanation and not endeavor to correct it. Usually the explanation is a correct one, but it is expressed in terms other than those which the non-analytically trained physician usually employs. If the analyzer does not understand what the patient means, it will be pretty certain that the patient will not understand what the analyzer means should he attempt to explain the symptoms. Until the analyzer has grasped the exact significance of the situation, as the patient sees it, it is nonsense for him to offer an explanation. It is of the highest importance not to explain too much to the patient about his neurosis in the beginning. The detailed reasons for this will appear later. It is, up to this point, only necessary for the analyzer to see that the patient's explanation *must* have some truth in it.

I am speaking here of mental explanations, not of the banal interpretations which include "too much uric acid," "a bit of nerve tire," "an acid stomach," "floating kidney," etc., which have been suggested. Even the medical explanations—given by the patient—bits of misconstrued physiology and the like, these

<sup>2</sup> Parentheses indicate the analyst's enquiries; the patient's answer follows.

also should be carefully listened to, not with incredulity and impatience, for the patient has accepted them in good faith usually from a fellow practitioner in whom she once had confidence.

After the first unburdening of the patient's mind takes place the real work of history taking begins. This may have occupied one or two visits. The first task now involves a rigid sorting process. A complete physical examination is usually necessary. The symptomatology will often determine just how minute the examination must be.

It must never be overlooked that physical disturbances may exist side by side with psychical ones. It is not my purpose to discuss the relation of the one to the other in just this place, but I hope to make it clear where a practical division may be made so far as psychoanalysis is concerned. Anybody may be analyzed to his advantage. A patient may be greatly benefited even if his headache be due to a brain tumor, but to take the position that such a procedure would be justifiable for the treatment of the tumor is naturally farcical. It would be on a par with the hypnotist's treatment of a mild emotional excitement due to an arteriosclerotic cerebral softening by the metronome, or the internist's treatment of the same by valerian, asafetida or bromides.

Complicated emotional states due to or accompanied by physical disorder are constantly being met with, and the beginning analyst must be on guard not to overlook such a physical disorder. On the other hand entirely too much stress may be laid upon the latter and the needs for a mental house cleaning overlooked. Even so profound a disturbance as the ataxia of tabes, with its well-known anatomical substratum, contains, according to as good an observer as Maloney,<sup>3</sup> a very large psychogenic factor in fear, which reinforces the ataxia and makes many bedridden who could otherwise walk with but little difficulty.

*(To be continued)*

<sup>3</sup> *Journal of Nervous and Mental Disease*, November, 1913.

## CRITICAL DIGEST

### SOME FREUDIAN CONTRIBUTIONS TO THE PARANOIA PROBLEM

BY CHARLES R. PAYNE, A.B., M.D.

It is only within the last few years that psychology has been considered as offering any promise of helping to solve the riddle of the psychoses. Until recently, no one had thought to look below the surface of the bizarre mental productions of the insane (delusions, hallucinations, etc.) to see whether these might have any real meaning and all had been content to accept them at their face value as mere crazy jumbles of words and ideas.

It remained for Prof. Sigmund Freud, of Vienna, to point out the way which bids fair to lead to a much more thorough understanding of these disorders and possibly later to distinct therapeutic gains. Freud came upon these new facts in the course of his observation of the mental phenomena of neurotic patients. The first cases of psychoses which he reported were some of chronic paranoia about the year 1895, but his more detailed studies are of much later date. The same applies to most of the articles to which I shall refer in this review, *i. e.*, they fall within the last decade.

Following in the direction which Freud had indicated, Jung and his co-workers at Zurich undertook the elucidation by analysis of the expressions and delusions of certain dementia præcox patients. The brilliant results of their work have been made accessible to English readers by Drs. Brill and Peterson in Monograph No. 3 of the Nervous and Mental Disease Monograph Series.

It is my purpose in this article to attempt a similar service in regard to the recent work which has been done on paranoia and paranoid conditions, collecting the numerous articles which have appeared, mostly in German, and by condensing and abstracting these, present the material in such a way that the English reading



public may gain a comprehensive view of the valuable work which has been done along these lines in the last few years.

In the present introductory outline, I can do no more than mention some of the articles which I intend incorporating in this review. The titles given here are more descriptive than exact, the full title and reference being reserved for the places where the material is reviewed: FREUD: "Psycho-Analytic Remarks on the Autobiography of Dr. Schreber"; "Analysis of Hallucinatory Paranoia." FERENCZI: "Rôle of Homosexuality in the Pathogenesis of Paranoia." BLEULER: "Affectivity, Suggestibility and Paranoia." BJERRE: "Radical Treatment of Paranoia." MAEDER: "Analyses of two Cases of Dementia Præcox with Paranoid Symptoms." SPIELREIN: "Analysis of Case of Dementia Præcox with Paranoid Symptoms." GREBELSKAJA: "Analysis of a Paranoic." Several shorter articles by other authors. As the title indicates, the subject will be considered purely from the Freudian aspect.

As one of the most interesting and instructive psychoanalytic studies of paranoia we may first review the case published by FREUD in the *Jahrbuch für Psychoanalytische und Psychopathologische Forschungen*, Vol. III, Part I, 1911, under the title<sup>1</sup> "Psycho-Analytic Remarks on an Autobiographically Described Case of Paranoia (Dementia Paranoides)." As the title indicates, this is a psychoanalytic interpretation of the clinical history of an intelligent paranoic patient. The latter was Dr. jur. Daniel Paul Schreber, one time president of the Saxon Senate at Dresden. Schreber, after his release from the institution in which he had been confined during the time in which his delusions ruled his personality, published, in 1903, a book entitled "Denkwürdigkeiten eines Nervenkranken" (Memoirs of a Nervous Invalid). This book Freud has used as the basis for his psychoanalytic interpretation of the case and formulations regarding the mechanisms underlying paranoia. A brief history of the case is essential to an understanding of his deductions.

Dr. Schreber reports that he has twice suffered from nervous troubles, the first time in 1884-5 from an attack which was diagnosed by his physician, Professor Flechsig, as hypochondria and

<sup>1</sup> "Psychoanalytische Bemerkungen über einen autobiographischen beschriebenen Fall von Paranoia (Dementia paranoides)."

lasted a little over a year and from which he completely recovered; the second time, from 1893-1902, from the attack which forms the basis of this study. His age at the time of the onset of this second attack Freud learned from outside sources to have been fifty-one. He had long been married but had no children.

Before proceeding to sketch the history of the second attack, we should notice a dream, which Schreber reports having had sometime previous to this attack, as Freud later refers to this many times in his argument. He dreamed one time that his earlier nervous malady had returned, over which he felt in the dream very unhappy; likewise on awakening, he felt correspondingly happy that it was only a dream. Further he had once toward morning, in a condition between sleep and waking, "the idea that it must be really fine to be a woman yielding to coitus," an idea which he would have rejected with great indignation in full consciousness.

The second illness began the last of October, 1893, with persistent insomnia which sent him to the clinic of Professor Flechsig, where he had been cured of his trouble eight years before. This time, however, the treatment was unavailing, he became rapidly worse and was soon committed to an institution called "Sonnenstein" at Pirna. His condition at this time is thus described in the director's report: "He expressed many hypochondriacal ideas, complained that he was suffering from softening of the brain, must soon die, etc.; still, ideas of persecution were already becoming mixed in the clinical picture on a basis of sensory illusions which at first seemed to appear rather sporadically while simultaneously a high degree of hyperesthesia, great sensitiveness to light and sound asserted itself. Later, the visual and auditory illusions increased and in connection with a general emotional disturbance ruled his whole feeling and thinking; he considered himself dead and decayed, sick of the pest, had the delusion that all kinds of abominable manipulations were being carried out on his body, as he himself expressed it, more horrible things than anyone could imagine and yet for a holy purpose. The pathological inspirations so completely absorbed the patient at times that he would sit for hours stiff and immovable, inaccessible to any other impression (hallucinatory stupor); at other times, these tormented him so that he wished for death,

made repeated attempts at suicide by drowning in the bath and wanted the cyanide of potassium destined for him. Gradually the delusions assumed a mystic, religious character, he had direct intercourse with God, the devils had fun with him, he saw miracles, heard holy music and finally believed he was in another world." Among the different persons by whom he believed himself persecuted and influenced, his former physician, Dr. Flechsig, occupied a preëminent position; Schreber referred to him as "soul-murderer" and innumerable times as "little Flechsig," the first word sharply emphasized.

During the course of the first year in the asylum, the clinical picture changed in a manner well described by Dr. Weber, the director of the sanatorium: "Following the original acute state, the whole mental activity was immediately drawn into a psychosis which could be designated as hallucinatory madness (*Wahnsinn*) from which constantly more definitely the paranoic picture appeared, as we might say, crystallized out." Thus on one side, he had developed an elaborate system of delusions which have the greatest claim upon our interest and on the other side, he had reconstructed his personality and showed himself capable for the tasks of life except for isolated disturbances.

Five years later, in 1899, Dr. Weber reported on Dr. Schreber's status as follows: "Aside from the outcropping of psychomotor symptoms which would at once impress even the superficial observer as pathological, Dr. Schreber seems neither confused nor mentally inhibited nor noticeably affected in his intelligence; he is discreet, his memory excellent, he has at command a wonderful amount of knowledge not only in juristic matters but also in many other fields and can utilize it in well-ordered trains of thought; he is interested in politics, science and art, and constantly occupies himself with these, so that to an ordinary observer he shows nothing out of the way in these directions. Nevertheless the patient is filled with pathologically conditioned ideas which have been reduced to a complete system, are more or less fixed and seem inaccessible to correction by objective consideration and judgment of the actual relations."

At this time, the patient considered himself capable of existence outside the asylum and instituted measures to secure his release. Although these were resisted by the director, Dr. Weber,



they were eventually successful and Dr. Schreber was given his liberty in 1902. In this struggle for freedom, he made no secret of his delusional system nor of his intention of publishing the memoirs. Rather, he emphasized the value of his thoughts for the religious life and the indestructibility of these by present-day science; he also called attention to the harmlessness of all the acts which he was called upon to perform by the content of the delusions.

In the legal decision which released Dr. Schreber, the delusions are thus briefly summarized: "He considers himself called to save the world and bring back the lost state of blessedness. This he could do only by changing himself from a man to a woman."

For an understanding of Freud's analysis, it will be necessary to examine the content of these delusions more in detail. Condensed from Dr. Weber's report, this was as follows: The point of the system was that Schreber was called to save the world and bring back the lost blessedness. This task had been imposed by immediate heavenly inspiration such as the prophets of old received; irritated nerves such as he had had for a long time had the peculiarity of being attractive to God but this concerned things which it was difficult to express in human speech since it transcended human experience. The most essential thing about the savior mission was that it would only follow his change into a woman. Not that he wished to change into a woman, rather the organization of the world made this change imperative, something which he could not escape even if personally he would much rather keep his honored position as a man. This change into a woman would come about in years or decades by way of a divine miracle. This was certain for him that he was the exclusive object of divine purpose as well as the most remarkable man who has lived on earth; for years, every hour, every minute he experiences the confirmation of this miracle in his body, also through voices which speak to him. In the first years of his illness, he felt disturbances in individual organs of his body which would long ago have killed any other man; he lived long without stomach, without intestines, almost without lungs, with lacerated esophagus, without bladder, with crushed ribs, has had his larynx many times in part eaten out, etc.; but divine miracles (rays) had always restored the parts destroyed and he was, therefore, so long as he

remained a man, immortal. These threatening phenomena had now long since disappeared, hence his womanliness has come to the foreground in which we have a process of development which will probably take decades if not centuries for its completion and the end of which scarcely a man now living will survive to see. He has the feeling that already numerous "female nerves" have passed over into his body from which by direct impregnation by God new peoples will proceed. Only then will he be able to die a natural death and have attained like all other people the state of blessedness. Sometimes not only the sun but also trees and birds which are so like remains of earlier human souls speak to him in human tones; in general, miraculous things happen to him.

Freud points out that we have here a very common delusion, that of being savior of the world, plus an uncommon delusion of change from man into woman, and says that a study of the memoirs shows the latter delusion to have been the primary one, that it was at first considered as an act of grievous injury and persecution and that it first appeared secondary in relation to the savior rôle. Also, it undoubtedly appeared first in sense of sexual misuse and not in service of higher purposes. Formally expressed, a sexual delusion of persecution has been later elaborated by the patient into a religious grandiose delusion. As persecutor, appeared first the patient's physician, Professor Flechsig, later in his place, God himself. Freud cites from the memoirs to support these views. Although these quotations are most interesting and convincing, it is not necessary to repeat them here.

Freud's analysis of Schreber's peculiar delusions regarding God, Heaven, humanity and his own special nerves for getting into communication with God is a beautiful piece of psychological penetration, but to follow it in detail would take us too long. Schreber's previous attitude of a skeptic in religious matters comes out clearly in his delusions in which, while yielding to God, he attributes to him the strangest characteristics. The sexual conflicts which had formerly raged in his mind under repression now appear clearly in the delusions, although the memoirs have been so thoroughly and prudishly censored that just where he would tell something which would be most enlightening from the standpoint of interpreting the play of the component instincts there is almost always an omission by the publisher on the ground of

discretion. Freud sums up the changes in his mind as follows: "He was formerly inclined to sexual asceticism and had been a doubter of God; after the course of the disease, he became a believer in God and a zealous participant in sexual pleasure." But as his new belief in God was of a peculiar kind so also was the form of sexual enjoyment which he had gained of uncommon character. It was no longer masculine sexual freedom but feminine sexual feeling; he constituted himself feminine toward God, felt himself to be the wife of God.

Having now briefly outlined the facts of the case, we pass to Freud's interpretation of them. He calls attention first to the fact that the original person named as persecutor and the one who remained most prominent throughout the course of the disease was Dr. Flechsig, the patient's physician in his first nervous trouble and at the beginning of the second. The first accusation against him in the delusions was that of soul-murderer. Just what this means, the data at hand are insufficient to explain, but enough material has been left uncensored to show that it is probably an euphemism for one who commits a sexual misdeed, such as an homosexual attack. It must be kept clearly in mind that in dealing with delusions we are dealing with the world of the unconscious and not with the world of reality.

Freud formulates the general relation of patient to persecutor in a delusion of persecution as follows: "The person to whom the delusion ascribes so great power and influence, in whose hand all the threads of the conspiracy converge, is, if he is definitely named, the one who before the illness had a similarly great influence for the emotional life of the patient or an easily recognizable substitute for this person. The emotional significance is projected as external force, the emotional tone inverted into its opposite; the one who now on account of his persecution is hated and feared is one formerly loved and revered. The persecution elaborated by the delusion thus serves first of all to justify the emotional change in the patient." Applying this formula to the case in question, we find from the text that Flechsig was first the greatly loved physician who brought Schreber out of his first attack. Freud thus sums up his conclusions on this point: "The occasion of the illness (second) was the outbreak of a feminine (passive homosexual) wish-phantasy which had taken the person of his physi-



cian for its object. Against this, there arose on the side of Schreber's personality an intense resistance and the defence struggle, which might perhaps just as well have been carried out in other forms, chose for reasons unknown to us the form of a delusion of persecution. The person longed for became now the persecutor, the content of the wish-phantasy, the content of the delusion of persecution." The peculiarity of Schreber's case consists in the development which this delusion undergoes and the change in him during the course of this development. The replacement of Flechsig by God affords him a way of escape from the unbearable homosexual wish-phantasy. If he must yield himself as a woman to God in order to save the world there is no longer the shame attached to the first idea; he yields to a higher power; the ego is indemnified by the grandiose delusion but the feminine wish-phantasy is likewise carried through and accepted. Struggle and illness can cease. Nevertheless, the heightened consideration for reality compels the displacement of this solution from the present to the distant future and the satisfaction with a sort of asymptomatic wish-fulfillment. The change into a woman is presupposed to take place sometime; until then, the person of Dr. Schreber will remain indestructible.

Freud now points out how the ideas of Flechsig and God became interchangeable in the delusions and passes on to show how both of these are probably transference substitutes for the recipient of early boyhood love, namely, the father, *i. e.*, Flechsig and God serve to revivify in Schreber's mind long forgotten and repressed feelings toward the father. This view is further substantiated by the many peculiar attributes which Schreber's delusions assign to God. His attitude toward God is much the same as the infantile mental attitude toward the father which psychoanalysis has disclosed to us.

A further ground for the formation of the feminine wish-phantasy is found in Schreber's childlessness, especially the absence of a son to indemnify him for the loss of the father and brother and to have furnished an outlet for his homosexual tendencies. We have been compelled to pass over many pages of fascinating analysis in which Freud shows the origin of parts of the delusions and can only urge any interested reader to follow the whole case in the original. We come now to the third part of the presentation, the discussion of the *mechanism of paranoia*.

Freud states that he had been impressed with the frequency with which the homosexual wish-phantasy was associated with paranoid symptoms. Mistrusting his own experience, he asked Jung, of Zurich, and Ferenczi, of Budapest, to investigate their cases of paranoia with this point in view. They were surprised quite beyond their expectation at the frequency with which it occurred. This relationship was often hidden during health and only became evident when the disease set in. Thus, from all reports, Schreber in health revealed no signs of homosexuality in the vulgar sense.

In the development of the sexual instinct, there is a stage between autoerotism and love of an object in which the individual takes his own body as an object of love; this is called "narcissism." This stage is perhaps a normal intermediate one in the development of the sexual life, but a considerable number of individuals show a tendency to remain in it longer than necessary. In this stage, the genitals play an important part in the phantasy life. The further course of this tendency to linger in the intermediate stage is by way of the choice of an object with similar genitals, thus the homosexual object choice, to homosexuality. Those who become really homosexual never get free from these inclinations.

Those who do attain to heterosexuality have this homosexual tendency turned to new ends; it appears combined with the ego instinct and aids in constituting the social instinct and contributes to friendship, comradeship and human sympathy, in other words, it is sublimated.

Freud now refers to a principle he previously enunciated,<sup>2</sup> namely, that every stage in the development of the psychosexuality affords a possibility for "fixation." "Persons who are not completely free from the state of narcissism thus possess a fixation which can act as a predisposition to disease, are exposed to the danger that a flood of libido which finds no other outlet may sexualize their social instincts and thereby make regressive the sublimations won during development. Toward such a result everything can contribute which calls forth a backward flow of the libido (regression) either on one side a collateral strengthening through disappointment in the woman, a direct damming back

<sup>2</sup> "Drei Abhandlungen zur Sexualtheorie." Translation No. 7 of the Nervous and Mental Disease Monograph Series.

through misfortunes in the social relations to the man, both cases of denial, or also a general increase in the libido which is too violent to find satisfaction in the ways already open and therefore breaks the dam at the weak point in its structure. Since analyses show that paranoics seek to defend themselves against such a sexualization of their social instincts, we are forced to the assumption that the weak place in their development is in the part between autoerotism, narcissism and homosexuality, that here lies their predisposition to disease."

Thus we see that the nucleus of the conflict in paranoia is the demand of the homosexual wish-phantasy to love the man. It is noteworthy that the chief recognized forms of paranoia can all be represented as contradictions to the sentence "I (a man) love him (a man)"; indeed they exhaust all possible formulations of this contradiction.

(a) The *delusion of persecution* contradicts it by proclaiming: I do not love him, I hate him. This contradiction cannot become conscious to the paranoic in this form. The mechanism of the symptom formation in paranoia demands that the inner perception, the feeling, be replaced by a perception from without. Thus the sentence changes from "I hate him" by projection into "he hates (persecutes) me, which then justifies me in hating him." The compelling unconscious feeling thus appears as the result of a perception from without, "I do not love him, I hate him because he persecutes me." Observation leaves no doubt that the persecutor is no other than the former beloved one.

(b) The *erotomania* assumes another point of attack for the contradiction which is quite unintelligible without this conception. "I do not love him, I love her." The same compulsion toward projection makes necessary the change: "I notice that she loves me. I do not love him, I love her because she loves me." Many cases of erotomania might give the impression of exaggerated or distorted heterosexual fixations without any other kind of foundation if one did not notice that all these love affairs begin not with the inner perception of love but with the perception of being loved coming from without.

(c) The third kind of contradiction would be the *delusion of jealousy* which we can study in men and women.

1. Delusion of jealousy in the alcoholic. Alcohol frees inhi-



bitions and makes sublimations regressive. Man disappointed in woman takes to alcohol, which means as a rule he frequents the tavern and the society of men which affords him the emotional gratification he missed at home. If now these men are the objects of a strong libidinous tendency in their unconscious then they defend themselves by the third kind of contradiction: "Not I love the man, she loves him," and he suspects the woman toward all the men whom he has sought to love. The projection distortion here disappears, for with the change of the loving subject the process is already outside the ego and needs no externalization.

2. Quite analogous is the jealous paranoia of women. "Not I love the women, he loves them." The jealous woman suspects the man toward all the women who please her. This can often be seen in the choice she makes of women of whom she is jealous. They may be old or unattractive, with nothing to make a man love them, but are chosen by the woman because they represent nurses, servants, etc., to whom her childhood homosexual tendency was attached.

(d) A fourth kind of contradiction is possible: "I love nothing and no one," which is equivalent to "I love only myself." This reveals the delusion of grandeur which we conceive of as a sexual overvaluation of the ego. It is right to assume that the delusion of grandeur is infantile and in later development is sacrificed to society.

We now turn to the *symptom formation* in paranoia. The chief characteristic is called *projection*; an inner perception is suppressed and as substitute for it comes its content, after having been somewhat distorted, as a perception from outside of consciousness. In the delusion of persecution, this distortion takes the form of a change of affect; what should have been felt from within as love is perceived from without as hate. One would be inclined to consider this noteworthy process as the most important in paranoia and absolutely pathognomonic were it not for the fact that (1) projection does not play the same rôle in all forms of paranoia and (2) it occurs not only in paranoia but also in other relations of the mental life.

We now look to the action of *repression* in paranoia. Repression may be considered as consisting of three phases:

1. Fixation, *i. e.*, an instinct or component instinct is halted at

some point of development and remains in a more or less infantile state.

2. Real repression, occurring in the conflict between instincts and ego.

3. Failure of repression, a breaking through of repressed material.

Now as to the mechanism of repression in Schreber's case. At the height of his disease, he had the delusion that the world was to be destroyed, sometimes that it was destroyed and he the only surviving man, the doctors and nurses whom he saw being called "miraculous, transient men." This world-destruction was due to the conflict between him and Flechsig or in the second phase of the delusion, himself and God. The explanation of this catastrophe is not difficult. The patient has withdrawn his libido from the persons of his environment and the outer world in general. Therefore, everything to him is indifferent and unrelated and must be explained as miraculous and transient. The downfall of the world is the projection of this internal catastrophe; his subjective world has fallen to pieces since he has withdrawn his love from it.

The paranoiac rebuilds his world, not beautifully but so that he can live in it. He builds it by the aid of his delusions. What we consider the production of the disease, the delusions, is in reality the attempt at healing, the reconstruction. Thus the real repression process consists in a freeing of the libido from the previously beloved persons and things. This setting free of the libido in itself is not however the pathogenic factor in paranoia. We must look further in the later application of this free libido. In hysteria, this is converted into bodily innervation or anxiety. In paranoia, it is applied to the ego and constitutes the grandiose delusions so common in the disease.

Freud brings up the question of whether the withdrawal of the libido (*i. e.*, interest derived from erotic sources) is sufficient to account for the imagined catastrophe, the downfall of the world, or whether we must postulate a general withdrawal of all interest; he says we do not now understand well enough the interrelations and interworkings of the ego and sexual instincts to fully answer this question but points out that the general intellectual interest is not entirely withdrawn, since Schreber observed

many things in the world but gave them different interpretations, calling the people who remained after the world's downfall, miraculous transient men; hence, it is more probable that his changed attitude toward the world is entirely or predominantly to be explained by the loss of his libido-interest.

Freud also compares briefly the mechanisms of paranoia and dementia præcox. Where the paranoic in his attempt at healing makes use of projection, the dementia præcox patient utilizes the hallucinatory (hysterical) mechanism. Further, the outcome in dementia præcox is more unfavorable in the severe cases, since the victory remains with the repression instead of with the reconstruction as in paranoia. The tendency of the dementia præcox patient is to stay in his shut-off world, of the paranoic to make a new world in which he can live. We may have the two conditions combined.

In conclusion, Freud expresses his belief that in essentials the neuroses (probably including certain psychoses as paranoia and dementia præcox) arise from conflicts between the ego and the sexual instinct and that the forms preserve the imprint of the history of the development of the libido.

In an article by DR. S. FERENCZI, of Budapest, on "The Rôle of Homosexuality in the Pathogenesis of Paranoia,"<sup>3</sup> the author takes up the subject which we found emphasized in Freud's "Schreber Case," namely, the *relation of homosexuality to paranoia*, and fortifies his conclusions by brief abstracts from the analyses of four of his paranoic patients. Before proceeding to the latter, we will find it instructive to note his introduction, which I will quote in full:

"In the summer of 1908, I had the opportunity of discussing in several long conversations with Professor Freud the paranoia problem. We arrived at certain conclusions which had been developed in essentials by Professor Freud while I contributed certain proposals and applications to the final form of the ideas. We agreed first that the mechanism of projection as it was described in the single case of paranoia which had been analyzed

<sup>3</sup> Ferenczi: "Über die Rolle der Homosexualität in der Pathogenese der Paranoia." *Jahrbuch für Psychoanalytische und Psychopathologische Forschungen*, Vol. III, Part I, 1911.



by Freud at that time, is in general characteristic of paranoia. We assumed further that the paranoic mechanism occupies a middle position between the contrasting mechanisms of the neurosis and dementia præcox. The neurotic frees himself from the affect which has become disagreeable by the different forms of displacement (conversion, transference, substitution), the dement withdraws his interest from the object and draws it back to the ego (autoerotism, grandiose delusion). Although the paranoic may seek the withdrawal of his participation, he succeeds only in part. A part of the desire is successfully drawn back to the ego—delusion of grandeur is lacking in no case of paranoia—but a greater or less portion of the interest cannot be set free from its original object nor turned back to the ego. This interest, however, has become unbearable to the ego so that it is objectivated (with inversion of the affect, *i. e.*, with negative characteristics) and thus forced out of the ego. Thus the tendency which has become unbearable and withdrawn from its object returns to consciousness as a perception of its negative from the side of the beloved object. Out of the feeling of love arises the feeling of its opposite.

“The expectation that further observation will prove the correctness of this assumption has been fulfilled. The cases of paranoid dementia which MAEDER<sup>4</sup> published in the last volume of this *Jahrbuch* confirm Freud's assumptions in far-reaching measure. Freud himself has by further studies not only been able to confirm these basic principles of paranoia but also certain finer peculiarities which we presuppose in the mental mechanism of the different forms of paranoia.

“The aim of this publication is, however, not the discussion of the whole paranoia question (to which Professor Freud himself is devoting a larger work) but merely the communication of some results which have come from the analysis of several paranoics. It turns out that the paranoic mechanism is not set up as a defence against all possible investment of the libido but according to present observations is directed only against the homosexual object choice.

“Even in the first case of paranoia analyzed by Freud, the

<sup>4</sup> Maeder's interesting article will be reviewed in a later number of this series.

homosexuality played a strikingly large rôle, one not sufficiently appreciated by the author at that time. Also in Maeder's investigations in paranoid dementia 'undoubted homosexual tendencies' were disclosed behind the delusional ideas of persecution. The observation of several cases which I will now sketch allows the assumption to seem justified that homosexuality in the pathogenesis of paranoia does not play an accidental rôle, but the most important one, and that perhaps paranoia in general is nothing else than *distorted homosexuality*."

The first case was a man of 38 years, husband of a woman who worked for the doctor, a servant in the post-office. He lived with his wife in a part of the doctor's dwelling, so that the latter had a good opportunity to observe him. At first he seemed an excellent servant, was most friendly and obliging and performed many services for the doctor. After a time, he began to drink heavily, come home late and abuse his wife both with language and physical violence. He accused his wife of being untrue, although she was a model of propriety (alcoholic delusion of jealousy). A lecture by the doctor cut short this attack and restored peace for a time. There were many signs of an abnormal fondness of the patient for the doctor's person, such as kissing his hands, etc. This attitude changed into its opposite during the attacks of alcoholism and jealousy, when he suspected the latter of being too intimate with his wife, etc. This paranoic tendency finally became so pronounced (patient kept a sharp kitchen knife by him and threatened to stab his wife and the doctor) that he was committed to an institution. An investigation showed that he had been previously married and had carried on in a similar manner with his first wife, so that she had finally secured a divorce. Ferenczi looks upon the alcohol in this case as a destroyer of sublimations, allowing the underlying homosexuality to come to the surface. "Thus the alcoholism was not the deeper cause of the paranoia, but in the insoluble conflict between his conscious heterosexual desires and his unconscious homosexual ones, he turned to alcohol; this, by destroying the sublimations, brought into view the homosexual eroticism which his consciousness got rid of by means of projection and delusion of jealousy."

Case II presents an even clearer picture of the phenomena which the author is discussing. The patient was a young married

woman who had for some years lived a comparatively peaceful married life. She had borne two children, the first a daughter, the second a son. It was after the birth of the latter that the mental trouble broke out in form of a delusion of jealousy. She became intensely suspicious of her husband and especially toward two classes of women, (1) quite young girls, 12 to 13 years old, and (2) old ugly women. Of women of her own social circle, even if attractive and pretty, she was not jealous. Her behavior became so unbearable and finally threatening that she was brought to the sanatorium. Ferenczi thought he might help her by analysis, but succeeded only in showing the mechanism of her trouble without accomplishing much of therapeutic value because of the transference upon himself of the feelings she held for her husband. Besides the delusion of jealousy, she also had delusions of grandeur and reference. Certain newspaper articles had been inspired by her enemies to reflect on her morals.

Some of the facts elicited by the partial analysis were: Her marriage had been one of convenience arranged by her parents. She had considered her husband as common and coarse, but had submitted to the marriage and for a time made the best of it. The birth of a daughter had troubled her because she thought her husband would prefer a son. About this time appeared the first signs of the jealousy, directed toward a 13-year-old maid in the household. She made the latter swear that her husband had done nothing to her. This quieted her at the time and she went along until the birth of the son, when she felt that she had done her duty by her husband and was now free. A double phase of behavior now set in: she was jealous of her husband and at the same time acted coquettishly toward other men. To make her husband impotent for other women, she compelled him to practice coitus several times each night. If she left the bedroom for a moment she suspected him of letting in another woman.

In the sanatorium, the patient found great pleasure in watching other women in the bath. An attempt to gain knowledge of her youthful attitude toward girl playmates met with great resistance but enough was elicited to show that she had been abnormally attached to them and to her nurses. She had sisters but no brothers.

Ferenczi sums up the case as follows: "This case of delusion



of jealousy only becomes explicable when we assume that we are dealing with a projection upon the husband of her own attitude toward her own sex. A girl who has grown up amid almost exclusively feminine surroundings, who as a child became too strongly attached to the female servants and in addition practiced for years sexual acts with a girl of her own age, is suddenly forced into a marriage of convenience. She submits, however, and rebels only once against the condition of not loving the husband when her desire for her childhood ideal (a little servant girl) is touched upon. The attempt at repression fails, she can no longer endure the homosexuality and must project it upon the husband. That was the first brief attack of jealousy. Finally, when she fulfills her duty and has borne him the desired son, she feels herself free. The hitherto pent-up homosexuality violently invests all objects which afford no possibility for sublimation (young girls, old women, servants) in grossly erotic form, yet this whole eroticism with exception of those cases where she can conceal it under the mask of harmless play, she imputes to the husband. In order to fortify herself in these lies, the patient is compelled to make the pretence of coquetry toward the male sex, toward which she really feels indifferent, indeed to act like a nymphomaniac."

Case III was a journalist who was constantly complaining to the civil and military authorities that an officer who lived across the street from him shaved himself in the window, sometimes in shirt-sleeves, sometimes with upper body naked. Further, he complained that the officer dried his gloves on a line in the window. The patient made a great ado about these things, seeking redress from one authority after another and when these refused it declaring them his enemies. The reason which he gave for being so much disturbed by such apparently trivial matters was that his duty to his sister who lived with him compelled him to do so.

Ferenczi thus summarizes the case: "The outbreak of the delusion of persecution, perhaps long hidden, was precipitated by the sight of a half-naked officer; the latter's shirt, underclothes and gloves also seem to have made a great impression on the patient. Females were never complained of nor accused; he always quarreled and fought only with men, mostly officers or higher dignitaries. I interpret that as the projecting of his own

homosexual pleasure with negative characteristics upon those persons. His desire, forced out of his ego, returns to consciousness as the perception of a persecutory tendency on part of the object of his unconscious pleasure. He keeps trying until convinced that he is hated. Now he can allow his homosexuality expression in the form of hate and at the same time keep it concealed from himself. The preference for being persecuted by officers and officials may have been determined by the official status of his father or the fact of his brother's being an officer; I suspect that these were the original infantile objects of his homosexual phantasies."

Case IV was a teacher in the common schools who suffered from dementia præcox with strong paranoid symptoms. His greatest enemy (delusional) was a school director whom he had formerly greatly loved and revered. Ferenczi sums up the case: "Here we have a man who for a long time successfully sublimated his homosexuality, but since his rupture with a formerly revered director must hate all men and as a reason for his hate must interpret every expression, every gesture, every word in the sense of his persecution."

In concluding his article, Ferenczi remarks that "the published clinical histories justify the belief that the essential process in paranoia is a re-investment of the homosexual objects of desire with unsublimated libido which the ego guards against by means of the projection mechanism.

"The elucidation of this process would naturally bring up a larger question, that of the choice of a neurosis (Neurosenwahl—Freud), namely, what conditions must be fulfilled in order that there proceed from the infantile double sexuality, the ambisexuality,<sup>5</sup> either the normal preponderance of heterosexuality, the homosexual neurosis or paranoia."

<sup>5</sup> "I propose to use instead of the expression 'bisexual tendency' in psychology the term ambisexuality. Thereby would be signified that in this disposition we do not understand the presence of male and female matter (Fliess) in the organism or male and female libido in the mind but the mental capability in the child to turn his originally objectless eroticism toward the male or female or both sexes and fix himself either on one of the sexes or on both."

*(To be continued)*

TRANSLATION  
WISHFULFILLMENT AND SYMBOLISM IN  
FAIRY TALES

BY DR. FRANZ RIKLIN

TRANSLATED BY WM. A. WHITE, M.D.

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INTRODUCTION

In psychiatry and the related sciences there has lately broken out a struggle for and against the Freudian theories. I count myself fortunate to be able, by means of such beautiful, inviting material as fairy tales, to bear a weapon in this conflict.

An accident, in which a chain of causes culminated in a careful examination of the Freudian mechanisms (the foundation works of this investigator have naturally become of the greatest importance for the proposed work) led me, through working with fairy tales, to go forth out of the realm of clinical psychiatry and tread ground that was formerly not especially known to me but where I soon felt myself at home. For the psychology of fairy tales, as we have learned to know through Freud, stands in close relationship to the world of dreams, of hysteria, and of mental disease. My excursion into this territory was fraught with certain difficulties all of which I could not overcome and which prevented me at first from getting anything conclusive from my researches. The material is too great for a novice to be able to fathom it in all directions in a short time, so I was provisionally constrained to take my examples from only a portion of the known collections of fairy tales. The greatest difficulty was due to my philological and my historical shortcomings. With a broader philological knowledge more could be gained from the same material. I have, for example, an impression, that in the Germanic mythology many documents lie buried that to me were simply inaccessible.



However, that is not an absolute obstacle. One is entitled to examine the separate tales as final in themselves for when, in a given instance, the work of interpretation is successful and the symbols are explained, each tale is dealt with as a complete theme in itself. Some render, apparently unaltered, old myths, which we analyze with success as psychological wholes. Others contain and utilize only fragments of myths as material for a new one that again is complete in itself. These mythological fragments have been followed up actively but the full significance of these tales has not been grasped nor exhausted. Psychological analysis by the use of Freud's methods and results was the first to accomplish this. This is successful, for the fairy tales are inventions of the directly utilized, immediately conceived experiences of the primitive human soul and the general human tendency to wishfulfillment, which we find again in modern fiction only somewhat more complicated and garbed in different forms. Thus we come to examine and interpret fairy tales and myths not only along astronomical and abstract lines but primarily in accordance with their deeper psychological trends.

Anyhow I arrived at the pleasing and important conclusion, that for my work, it was not necessary for the investigation of fairy tales, in a psychological sense, to know their historical pedigree first. In fact this is often impossible. I found in the introduction to "*Sammlung Neuisländischer Volksmärchen*" by Frau Dr. Rittershaus<sup>1</sup> the following, for me, not a philologist, consoling conclusion: that the Icelandic fairy tales are found step by step in agreement with the German folk tales; that they, in part at least, are common Germanic property, but that, especially, the theory that all European fairy tales sprang from India is incorrect. Many facts establish, how a whole mass of fairy tales, especially in Iceland, are indigenous, autochthonous, that in certain ones a later immigration is demonstrable; that the great majority of fairy tales have probably arisen at different places and at different, indeterminable times; that it is impossible, to locate the home of the folk tales, as little as it has been possible to trace them all back to one hazy Aryan myth.

And Stoll ("*Suggestion und Hypnotismus in der Völkerpsy-*

<sup>1</sup> Halle a. S., Max Niemeyer, 1902.

chologie," II. Auflage, Leipzig, 1904) shows in different places, how suggestive and autohypnotic actions, procedures and views of the same sort occur among peoples who are not closely related one with one another either geographically or historically or through descent. Only the psychic foundation is everywhere the same.

Finally my work itself proves to me that the human psyche produces at all times and in all places suggestive and hypnotic phenomena, produces universally, just as general, for example, a symbolism, which is chiefly constructed from the unconscious and which is found in fairy tales as a primitive poetic production, and again in the dream and in psychopathology.

Now certainly the scientific method in the psychological exploration of fairy tales is circumscribed by the investigation of dreams and of psychotic structures. Here, through many experiments, one can follow the sources and association paths which the elements in the formation of the dream story or the delusional structure have supplied. One can compel the psyche, through such wider information, to affirm or deny its meaning. The creator of these fairy stories in his traditional form is dead or unknown to us. We have, therefore, on the one hand, to refer to the comparison of existing documents in order to get at the correct interpretation; on the other hand, however, the human psyche in the dream and in conditions in which the unconscious is especially active, and also in abnormal psychic activity, is always still a fairy poetess, and a continued comparison of these products with the fairy tales permits us to draw the most valuable conclusions.

It is surprising how great a rôle the sexual plays in fairy tales and how great is the agreement of the sexual symbolism with that of dreams and psychopathology. When one realizes and admits, however, that the sexuality, besides hunger and the social factors, plays a leading rôle in life and constantly influences our thoughts and actions from youth up (for the sexuality develops, like everything else, from an infantile form to a full, many sided structure) then it does not appear in any way surprising, although the fairy tales appear to us in a new, less childlike garb. They lose on that account nothing of their charm and power of attraction.

## II

## WISH STRUCTURES AND THEIR FORMS

I must refrain here from a statement of the Freudian investigations into the dream life and the significance of dreams as wish fulfilling and refer to Freud's "Traumdeutung"<sup>1</sup> itself. I cannot enter into a discussion of the results although it is now the order of the day in psychiatry. I rely upon numerous works of others who have successfully handled<sup>2</sup> Freud's methods, and on my own previous studies. Examples of well analyzed wish dreams are to be found nearly everywhere.

I cannot refrain, however, from taking an example from life.

A young man had seen, for the first time, the young lady who later was to become his wife. Soon thereafter on falling asleep he had the following optic, extraordinarily plastic, symbolic dream. He stood before a large portal hung with thick, blooming garlands. Two garlands were fastened to a button at the upper part of the door and hung down separated one from one another. While the portal was at first about the size of a mouth it became a church portal into which he as a very small man entered. It appeared to him as though he was leading someone.<sup>3</sup>

Naturally here we are dealing with an erotic wish dream which is prophetic of a happy future while indeed only too often the wish fulfillment in the dream is a surrogate for reality which refuses the fulfillment of the wish.

The single elements of this symbolic marriage in which coitus as well as the marriage ceremony are contained in strong condensation, in flowery, colored dramatization, spring from the events of the preceding day. The young man had called upon an acquaintance and stumbled unexpectedly upon the preparations for the arrival of an heir: the child's bed was embellished with the usual curtains, these gave the garlands in the dream their form, which on the other hand showed a great similarity with the external formation of the female genitals; his own person as a small man, that entered under this wreathed portal, is a very ingenious

<sup>1</sup> "Die Traumdeutung," 1900.

<sup>2</sup> For example, Bleuler and Jung in Zürich.

<sup>3</sup> Compare the picture "Triumphal Procession of Priapus" by Salvisti in Fuchs, "Das erotische Element in der Karikatur," 1904.



dramatization of masculinity. The festive green was co-determined by the sight of the little daughter of another acquaintance whom he had visited on the same day, who had smeared her mouth, in eating, with greens and so looked very funny.

These details suggest how many single elements, all springing from the same ideational sphere, but dispersed, are brought together in the structure of the symbolic dream picture.

The fairy tale also, since it appears as a wish-fulfilling structure, may also often gather its material from widely separate sources, from other fairy tales, from myths, which in their essentials have a different content, in order to arrange the parts into a new whole, with a new content.

"Freud maintains, that our psyche has the tendency to so work over the world picture that it corresponds to our wishes and efforts. This tendency comes to light unhindered in all situations where thoughts, as moulded by external circumstances, are disturbed in their logical relations to reality. That is the case in the dream, then, however, also in all psychic activities of waking, which are not guided by attention."

Proceeding from this position Bleuler<sup>4</sup> shows the occurrence of Freud's mechanisms in the different psychoses.

In order now to show the fairy tale in its relationship with other wish structures I give the following example.

We take Bleuler's own example in his last cited work, which shows the proneness of poetic phantasy to roam into the wish territory.

The poet, whose longings reality can not still, creates for himself, quite unconsciously, in phantasy, what life has denied to him. Many of the most beautiful love songs have been written by those who were unhappy in love. Gottfried Keller had no luck precisely with those women who corresponded to his high ideals; therefore he had the need to commit "the sweetest of poetic sins, to invent lovely women such as are not found on this sad earth." This busying himself with pictures of women is for him the substitute for love. One of the greatest of writers for children of all time, Johanna Spyri, began first to write when she had to give up

<sup>4</sup> Bleuler, "Freudsche Mechanismen in der Symptomatologie von Psychosen," *Psychiatr.-neurol. Wochenschrift*, 1906, No. 35 and 36.

longed-for grandchildren; she has made grandchildren for herself in her poetry.<sup>5</sup>

Walter von der Vogelweide, who often mourned over his poverty, tells in his poems frequently of unveiled wish dreams which his chivalry-loving ideals let come to pass.

I wot it came to be  
All lands were serving me;  
My soul was light and free,  
No care to burden me;  
The body, at its ease,  
Was moving as it pleased;  
Nought there was to trouble me.  
May God decree what is to be—  
A fairer dream I ne'er shall see.

In still more detail he relates a wish dream in the following poem:

Lady, take this wreath,—  
I said to a beauteous maiden;—  
And you will grace the dance  
With the flowers, fair to see.  
Had I but precious stones,  
You should be decked therewith;  
Believe my promises,  
Behold my faithfulness!

She took what I held out,  
Like a joyous child,  
And her cheeks flushed  
Like roses among the lilies.  
Graciously she bowed her head,  
But dropped her beauteous eyes—  
And this was my reward,  
None greater did I crave!

Through what she did to me  
I must at this summer time  
Search the eyes of all maidens,  
My anxious quest to end—

<sup>5</sup> Since then the wonderful analysis of Freud has appeared: "Der Wahn und die Träume," in W. Jensen's "Gradiva," as the first volume of these "Schriften." Unfortunately we know too little of the psychological relation in which the poet of this Pompeyan phantasy stood to it. Probably in a very intimate relation; it is one of the "living" poems.

Will she come to this dance?  
Lady, by your graciousness,  
Raise the veil—let me peep  
Underneath the garland.

So fair and sweet are you,  
That gladly will I give  
The best of all I have.  
I know of flowers, red and white,  
Growing many in the meadow,  
Where they unfold in beauty,  
And where the birds are singing—  
Then together let us pluck them!

Greater happiness I never felt  
Than had now fallen to my lot!  
From the blossoming trees  
Petals dropped on us and o'er the grass,  
Then I laughed with joy.  
*As I was so happy,*  
*And so rich in my dream,*  
*The dawn came, and I must waken!*

In "Kokoro" by Lafcadio Hearn there is a charming Japanese tale "The Nun in the Temple of Armida." It describes very effectively the formation and activity of a psychic wish and substitution formation that follows in some measure Bleuler's example of Johanna Spyri. There the poetess creates in phantasy the wished-for grandchildren, here the mother her lost child, going to the point of formal identification.

In the original it is related, in wonderful language, how O-Toyo during the long absence of her husband in the service of the liege lord, performed, with her little son, the daily duties and attended piously to all the good, religious customs that were observed on such occasions. Daily she spread for her husband who was afar off, a miniature meal on a small table, as if the manes and gods offered it. If there is moisture on the inner side of this little dish cover, she is peaceful, because she is then certain, according to the prevailing belief, that her absent sweetheart still lives. Her small boy is her constant joy and she busies herself with him in various intimate ways. They wander together through the wonderful country to the far-off mountain Dakeyama, seen in the distance, where all those go, who wait anxiously for



dear ones far away. On the peak of this mountain stands a stone of the same height and similar in appearance to a man, about which pebbles lay and are heaped up. A nearby Shinto sanctuary is dedicated to the spirit of a princess, who looked out from the mountain after her distant beloved one until she was consumed by sorrow and turned into stone. In going away one prays and takes one of the piled up pebbles along. If the beloved one returns the stone must be taken back and offered as a gift of thanks and in remembrance, with a number of other pebbles.

O-Toyo's husband died while away and shortly afterwards the little son died too. All this only came to her consciousness in sudden flashes. Between these flashes of knowledge reigned that deep darkness which the gods in their pity have given to man.

Now comes the fulfilling wish structure. As the darkness begins to recede and O-Toyo is left alone with her memories she orders small playthings, spreads out children's garments on the grass, fondles and chats with smiles that often, indeed, change to loud, convulsive sobs.

She has recourse to magic rites. The wise priest strikes, after a suggestive ceremonial, upon a curved instrument and repeats "Hitazo-jo!" "I have come." In calling he gradually changes his voice, until it takes on the sound of that of the wished-for deceased, whose spirit has now entered into him.

In this manner O-Toyo receives the following consoling knowledge: "O mother, cry no more on my account, it is not right to moan for the dead;<sup>6</sup> their mute way leads over a stream of tears, and when mothers cry, the flood rises so the soul can not get over but must wander restlessly here and there."

From this hour on she was no longer seen crying. But she will not marry again and has commenced to manifest a strange love for every thing little. Her bed, the house, the room, the flower vases, the cooking vessels are too large for her. She eats only out of tiny dishes with small, children's knives and forks, and spoons. She is permitted to do as she wishes for she has no other caprices.

Her parents, with whom she lived, were old and advised

<sup>6</sup> The same idea is at the bottom of the fairy tale of the "Little Tear Jug"; see following.

O-Toyo to become a nun in a little, wee temple with a little altar and small pictures of Buddha so that she would not be among strangers. She agreed gladly and a little temple with all its little parts was built for her in the court of the former temple of Armida. She made garments on a little loom that were much too small for use, but which were bought by certain store keepers who knew her story.

Her greatest joy is the society of children who pass most of their time with her. The children play with her as their equal and she is like a sister to the small ones. And after her death they set up a wee little grave stone.

The tendency to identification with the wish object, which reaches, in this story, a very intensive grade of the wish-fulfilling activities, has been observed by others in the psychoses, namely *dementia præcox*.

I take the following example from Jung: a woman in the climacterium suffered a condition in which she felt her arms and legs becoming always smaller; she wished to be carried in the arms and felt how she would let herself go. Such patients also coin expressions—"I am" instead of "I would like to have" with relation to the wish object. Compare Jung,<sup>7</sup> "I am the main key," "I am the crown," etc., instead of "the main key belongs to me," etc.

Bleuler, Jung and the author have published in recent times a great number of examples of wish dreams, wish deliria, and permanent symptoms, namely ideas of grandeur in the psychoses, which are conceived as pathological compensation products of unfulfilled and unfulfillable wishes.

The ideas of grandeur of a patient who is Queen Regent, God of Love Semele, Mary, Venus, Ida von Toggenburg, Princess Thorn-Rose, Cinderella, Bundesgerichtsdame Helvetia, von Jung Elfenlieb, Simmenthaler Rassenkalb and many other titles of high social position or great fertility, as well as the mistakes of the persons united in her and of her desired husband Zeus, Helveticus, Märchenprinz, Muneli von Steiermark (a blue ribbon bull), etc., suggest not only the relationship of these wish titles with the wish structure of the fairy tale but also the deeper understanding of

<sup>7</sup> Jung, "Ueber die Psychologie der *Dementia præcox*," Halle a. S., C. Marhold, 1907. See Monograph Series, No. 3, for translation.

the fairy tales by the patient in the sense in which they should be understood in this work.

Social weakness, intellectual and other defectiveness, defeat in the sexual competition. Lack of sexual satisfaction is often bound up<sup>8</sup> with the disposition to psychoses, so that it must not surprise us, if the psychoses produce, in like frequency, wish structures, and that the patients, in these structures, are rich, fruitful, strong, of princely descent, marry princes and princesses, and that the rivals and adversaries are killed and avenged.

Indeed the clinical forms of these wish structures and the diseases belonging to them are very varied.

A poor maiden wanted to marry a shoemaker and did not get him. We are poorly informed of the exact processes at the beginning of the psychosis. But a peculiar motor stereotypy which lasted over thirty years could still be traced back to its origin. During the whole day, tireless as a pendulum, she stroked the back of the left hand with the back of the right fist, so that the skin over the joints of the fingers of the right hand was thickened and horny and the joints themselves, as was demonstrated at autopsy, had suffered a wearing away of the articular cartilages (so-called arthritis deformans). It turned out that the stereotypy had followed from, what in the first years was a quite clearly recognizable movement of shoe polishing, which points us to the relation with the unhappy love for the shoemaker.

Another form is that of the wish delirium.

A young woman with a very good literary and musical education, wished nothing better than to marry a young and excellent artist. Her wishes were without prospect of fulfillment; an acute illness set in. She was committed to the asylum and conceived of the commitment of herself and everything that happened about her as a descent into the underworld. The determiner of these thoughts was the artist's last work "Charon." The further happenings in her environment she interpreted by the occurrence of a whole mass of reminiscences brought together out of her life, as difficulties or objections, which opposed her union with her beloved, but finally everything was overcome. Finally she saw in a fellow patient her beloved and slept with her several nights.

<sup>8</sup> The question of the causality of these factors will here be left open; certainly there exists a tension between the attainable and the wished for.



After this she believed herself pregnant, felt and heard twins in her womb, later believed herself later to have been delivered of them and hallucinated a child by her in her bed. With this the wish delirium, of nearly three months standing came to a close. She had found—unfortunately not definitely—a curative surrogate for reality.

Among the so-called prison psychoses, mental diseases which are produced through confinement, and either belong to the known clinical disease groups or perhaps occur as independent diseases, are found certain cases of outspoken wish type. The voices announce freedom, beloved relations rescue the prisoner or similar things. Moritz von Schwind has represented in an exceedingly convincing manner in his "Dream of the Prisoner" the wish dream of one in confinement (original in the Schack gallery in Munich).

The wish structure can, as already said, take on any number of clinical forms, ecstasy, cataleptic states, transitory sensory falsifications, hysteriform attacks, mimic automatisms, the progressive development extending over years of a wish-fulfilling delusional system with otherwise correct behavior, and so forth.

Naturally it is not meant to say that all that we see in the mental diseases are only wish structures, however these stand to the remaining appearances of the pathological complex in a quite special relation which we will not follow further here.

I hope through narration and observed examples taken from literature, more than through such a clinical and theoretical exposition, to have shown the significance of wish structures in our psychology and so to have prepared the understanding for similar structures in the fairy tales.

### III

#### THE WISH STRUCTURE OF THE FAIRY TALE. FAIRY TALES AS WISH STRUCTURES

There are countless fairy tales which when submitted to analysis and taken as a whole are found to represent the most splendid wish structures. Innumerable fairy tales, as well as myths and legends, tell us about magic gifts, objects and qualities, which the human wish-phantasy has created.

In the "Bekennnissen einer schönen Seele" (Goethe, Wilhelm Meisters Lehrjahre, Book VI) this conception of the fairy tales is very beautifully presented:

"What would I not have given to possess a creature that played a very important rôle in one of my aunt's fairy tales. It was a little lamb that had come to a peasant maid in the woods and had been fed; but in this pretty little animal there was an enchanted prince, who finally appeared again as a beautiful young man and rewarded his benefactress by his hand. Such a lamb I would have loved to possess." The story of the "Nun of the Temple of Armida" gives us an opportunity to enter upon a group of fairy tales of which the story of "The Little Tear Jug" serves as a good example.<sup>1</sup>

Three days and nights a mother watched, cried and prayed at the sick bed of her only beloved child without whom she could not live. The child died. The mother was seized with a nameless pain, she did not eat or drink and wept three long days and nights without ceasing and cried out after the child. Then the door softly opened and before her stood her dead child who (in the present wording of the tale) had become a holy angel and smiled in glory. He carried in his hands a little jug that was almost running over. He said: "O dear little mother, weep no more for me! See! in this jug are your tears which you have shed for me. One more and the little jug will overflow and then I will no longer have any rest in the grave or any blessedness in heaven. Then weep no more, for your child has been raised on high and angels are his playmates." With that he disappeared and his mother wept no more tears so as not to disturb her child's rest in the grave or his joy in heaven.

If we take the motive here in "The Little Tear Jug" and in the Japanese story of "The Nun of the Temple of Armida" which appears as magic, in its psychological significance, so we have a teleological structure that is equivalent in its psychic healing tendency to the other wish structures. This fairy tale might just as well be the true narrative of a dream experienced by a person in the circumstances described which led to the stilling of their sorrow and to rest.

<sup>1</sup> Ludwig Bechstein's "Märchenbuch," II. illustrierte Ausgabe, Leipzig, G. Wigand, 1857.

Now it is not only in regard to single events, but this healing agent has come to be a general, psychic purposeful belief that the dead as a result of excessive grief are disturbed in their rest. That is not a therapy for the dead but for the living. The same belief is expressed in the words of the spirit of the dead child who by autosuggestion has entered the Japanese priest and attains in the good O-Toyo the wished-for object. And does not the Christian belief, that the dead children all go to heaven, work quite the same way?

The same motive in a somewhat different setting is treated in another fairy tale, "The Shroud" (Grimm).

The mother wept after the death of her little boy. Soon after the child appeared at night in the place where it had eaten and played during life; the mother cried and so did the child and then disappeared at morning. As the mother would not cease weeping it came in the night in its little white shroud, sat at the foot of her bed and said: "O mother, stop crying or I cannot rest in my grave for my shroud is wet with the tears which fall on it." As she heard this the mother was frightened and cried no more. The next night the child came again holding a little light in his hand and showed that now as his shroud was dry he could rest in his grave. Then the mother commended herself to God in her grief and bore it quietly and patiently<sup>2</sup> and the child did not return but slept in his bed under the ground.

The hallucinations whose sudden appearance, for example, stays the hand of the would-be suicide often belong in the domain of the teleological, defense mechanisms, indeed not only as cures for psychic wounds but as protection against danger.

We turn to numberless wish structures occurring in fairy tales—also in mythology, legends, beliefs in magic, etc.—which may be pointed out with little difficulty to correspond, in part most naïvely, to human wishes created from our insufficiencies, this is one side of their significance at least. (Probably they have still another, erotic side.)

In itself it is not striking that the fairy tale should concern itself so much about kings; the matter acquires a wish coloring, however, as soon as we consider many fairy tales in which the

<sup>2</sup> For further literature see Rittershaus, "Neuisländische Volksmärchen," pp. 14 and 15.



poor peasant maid marries a prince and the shepherd boy a princess. Those are wish structures!

A whole mass of means serve for the betterment of human deficiencies. Seven league boots for Hop o' my Thumb, strength giving belts, gloves, drinks; to the wish to be able to fly correspond cloaks and enchanted birds as means of transport; a little bed, with which one may be carried everywhere one wishes; or one is changed directly into a bird; the desire to eat is fulfilled by "little table set yourself." Magic hoods and stones serve to help against persecution or then magic combs that turn into forests, magic handkerchiefs that interpose a great body of water between the pursued and the pursuer, etc. Riches are acquired through the gold-shedding mule, or by vanquishing giants by magic means. There are tubes and magic mirrors to enable one to see and to know everything that goes on over the whole world. There are magic wands for turning living or lifeless beings into what one wishes and not the least in order to injure one's enemies. There are means to look into the future and to attain one's wishes, apples of life and water of life for rejuvenation and the preservation of this otherwise all too short existence.

This enumeration is naturally quite incomplete; it contains only examples. A more detailed citation is probably superfluous as in every collection of fairy tales examples may be found without much difficulty and mythology contains numerous proofs.

Two great groups of fairy tales show, for example, in their present completed form a distinct wish formation, namely the so-called stepmother tales, and the fairy tales in which the mentally or physically, weak- and feeble-minded are the heroes.

If we take these fairy tales as such they must be conceived at once as wish dreams or other corresponding wish structures of the rejected maidens or the simpletons. A similar relation can be worked out as with the motive of "The Little Tear Jug." What can be for the individual a healing, wish-fulfilling surrogate for reality, can also be generalized as a wish product of a whole set of people, of an entire category of people living under the same conditions, in which connection the appropriateness is not as important as the psychological tendency to think in the sense of the wish.

*(To be continued)*

## ABSTRACTS

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ABSTRACTED BY L. E. EMERSON, PH.D.,

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1. Further Suggestions as to the Technique of Psychoanalysis. SIGMUND FREUD.
2. The Relation Between Anxiety Neurosis and Anxiety Hysteria. ERNEST JONES.
3. On the Psychopathology of Anxiety. L. SEIF.
4. Contribution to the Analysis of Sadism and Masochism. PAUL FEDERN.
5. The Matron of Ephesus. An Investigation of the Meaning of the Fable of the Faithless Widow. OTTO RANK.

1. *Technique of Psychoanalysis*.—Continued article.

2. *Relation Between Anxiety Neurosis and Anxiety Hysteria*.—

Our advance in the knowledge of the pathology of anxiety states may be divided into three steps: (1) When, in 1895, Freud distinguished from neurasthenia a clinical picture which he called "anxiety neurosis"; (2) when, in 1898, he created the concept of anxiety hysteria in order to indicate certain fears; (3) when, in 1912, Stekel showed that the same psychical factors that played the chief rôle in anxiety hysteria also were effective in apparently pure cases of anxiety neuroses.

The question is,—which of the two aspects, the physical or the psychical aspect, of the sexual impulses, is the more important as a reason for these neuroses. Many authors assume that the problem is essentially physical. If one examines the situation carefully, he sees it to be essentially one of *intrapsychical conflict*. This conflict arouses an inborn fear instinct against repressed sexual wishes which expresses itself as pathological anxiety. There are cases of anxiety neuroses in which the removal of the physical factors (coitus interruptus, etc.) results only in a partial improvement, and other cases in which such factors utterly fail. The analysis of such cases always

demonstrates infantile psychical moments, such as are characteristic of anxiety hysterias. For these reasons one must attribute to psychical factors the essential causative agents to all anxiety states. Bodily factors alone can probably never produce pathological anxiety.

Freud distinguishes between the "actual" neuroses and the psychoneuroses in three ways: (1) The individual symptoms of the first are unamenable to any further psychological analysis; (2) the causes of the first are physical, the second psychical; (3) the cause of the actual neurosis is actual (present), while that of the psychical lies in the past (childhood).

The psychoanalytic treatment of an anxiety neurosis should be undertaken only if the treatment of the physical factors gives no improvement, and when the treatment of such factors is not easy, as in the case of widows over forty, and maidens.

The essential cause of all forms of anxiety states consists in a deficiency of psychical satisfaction for the libido. Anxiety springs from the inborn fear instinct and the exaggeration in its expression is due to a defense against repressed sexual wishes. In all cases the psychical factors play an important part, in many the only part. Physical factors accompany them often, but in no case they alone give rise to an anxiety state. Physical factors are much more important, however, in anxiety neuroses than in anxiety hysterias. The anxiety neurosis should be considered as a single symptom of the anxiety hysteria, which is the wider concept.

3. *Psychopathology of Anxiety.*—After a short but intensive historical orientation, the author takes up the Freudian point of view. "If under certain conditions the psychophysiological sexual excitation can find neither bodily nor mentally an outlet, then there arises, psychically, the picture of pathological anxiety, physically, its accompanying physiological phenomena." According to Freud, pathological anxiety is a *substitute* for sexual satisfaction: according to Jones pathological anxiety is a *reaction against* repressed sexuality. To the author a combination of these two views is necessary to get the true conception of pathological anxiety. "The mechanism of anxiety, wherever and under whatever conditions it appears, whether normal or pathological anxiety, is always the same, a defensive or protective mechanism, obviously the result of thousands of years of biological work in the service of the preservation, development, and adaptation of the individual to the outer world."

Pathological anxiety differs from the normal in three ways: (1) In normal anxiety the personality is unified; in abnormal, however, it is divided. Pathological anxiety has a bipolar structure. (2) In contrast to normal anxiety, pathological anxiety is always related to



sexuality. And (3) pathological anxiety has an inordinately greater intensity than its physical occasions warrant, in contrast to normal anxiety, where the occasion is adequate to the effect.

The author finds a final significant character of pathological anxiety in the passive, feminine character, only here much increased, namely, the masochistic component of the sexual impulse. The author concludes that out of new and deeper insight comes a new possibility of helping sufferers.

4. *Contribution to the Analysis of Sadism and Masochism.*—The author narrows his field to an investigation of the relation between sadism and the active sexual component only, and only for the masculine sex. The author does not believe that the active component of the sexual impulse is identical with sadism, but is changed into sadism by a peculiar psychic mechanism. This change takes place at a time when sexuality is not mature, but nuclear, autoerotic, for specific sadism is traced back to a pre-puberty age, often to the infantile life of the individual. Hence sadism is a result of the mechanism of the unconscious. Sadism is no simple, sexual component, but the immature, masculine, active sexuality, unconscious to the child during development, becomes transformed from the primary psychic system into sadism, through the mechanism of the unconscious. Sadistic impulses arise out of the infantile, immature, but active feelings in the penis. The author seeks to establish his position by showing the connection between sadistic dreams and sensations in the penis. The case of a man who had gonorrhea is quoted. Only during the disease did he have sadistic-masochistic dreams. Another patient, suffering from urethritis posterior in consequence of gonorrhea, had a dream of a fight. No dream is known to the author, though, where pleasure in pain itself is shown. He deduces from that, that algolagnia is not identical with "sadomasochismus."

This position is supported by the childhood histories of many sadists. The relation of sadism with the excretory organs is in the highest degree complicated. The employment of these processes as the expression of sexual activity is the simplest. Typical are those cases where children like to daub up others. Coprolagnia and urolagnia complicate matters. Sexual tyranny is the minor picture of masochism and is characterized by a sexually toned desire for power.

To sum up: If one seeks to trace back to its roots the complicated picture of sadism he will find the original root to be sexual, in particular. The source of energy of sadism is *libido*.

5. *The Matron of Ephesus.*—In this fable a widow mourns for her dead husband, refusing food and drink. But after a while she returns

to life, so to speak, and actually substitutes the dead body of her husband for a thief hanging on the gallows in order to rescue the life of the new lover. The author shows that this is a common theme, having many versions. As a rule the story runs as follows: A wife learns that a widow was untrue to her husband and had very soon forgotten him. She regards herself as incapable of such disloyalty, but is convicted of faithlessness to her supposedly dead husband, and commits suicide by hanging. The account of Petronius is an exception. Petronius begins his story by the tale of the matron of Ephesus who decided to seek death by hunger, watching by the body of her beloved husband. She was forced to eat, by a soldier who was on guard near a crucified thief, and soon consoled herself by his love. She was compelled also by the soldier, who wished completely to subdue her, to substitute the body of her husband for that of the thief. This is varied by the wife not only dishonoring her husband's body by hanging, but also by mutilating it, that it might be a more complete substitute for that of the thief. Sometimes the story runs that she knocks out two of his teeth, or cuts off both ears, or as in Voltaire's "Zadig" tries to cut off his nose. From Freud's dream analysis we know that these are symbols for castration.

Now one can see the reason for the story of mutilating the body and why that is almost universal in the various tales. The widow is faithful, not to the body of her husband, but to his penis, and to that only so long as it gives her sexual satisfaction. That such a phantasy lies close to the minds of men is shown by the Japanese custom by which the widow preserves, embalmed, the penis of her dead husband. Scherring tells the case of a Belgian woman of his acquaintance who secretly cut off the penis of her beloved dead husband and preserved it in a silver box. An older illustration is that of a French woman who embalmed and perfumed the genitals of her dead husband and preserved them in a golden casket. But one does not need to go to such remote sources for examples. In the Egyptian saga of Isis and Osiris, Osiris is killed and cut into pieces, through jealousy, by his brother. Isis puts the pieces together again and breathes life into them; only the penis is lost and she has to make one out of wood. This unchangeable wood phallus, which is a good substitute for the originally embalmed member, has its counterpart in the series of tales of the faithless widow. A widow cannot bear to part with her beloved husband John, so she has a wooden image made and holds it all night, until her clever maid substituted her living brother. The woman was thus satisfied, and when the maid said she could get no breakfast because they had no wood, she told her to throw the wooden John in the stove.

Gradually, as the motive of preserving the phallus became offensive, it was transformed, through repression, into the wooden image of John. This transformation goes still further, when in the story the widow sacrifices the body of her husband as fuel to boil a can of fish for her new lover. In the next transformation the wooden image becomes a wax one, which is later melted and remoulded into candles for the wedding banquet.

We can now see the origin of the story of the faithless widow. It originally was only the fantasy of an especially *faithful* widow, who, after the death of her husband, shunned any other sexual intimacies, in spite of her inclinations, in order to gratify herself with the severed and embalmed genitals of her husband. This motive soon became offensive and was repressed, and in later tales became the foundation of stories of feminine faithlessness.

The author shows the connection of hanging with the story, through the fact, well known, he says, that when a man is hanged he has an erection.

The mechanism of these transformations is the same that Freud has shown in his "Traumdeutung," *i. e.*, the displacement by emphasis from significant to insignificant parts of the story. Thus the origin of the story is obscured.

### Zentralblatt für Psychoanalyse

ABSTRACTED BY C. R. PAYNE,

OF WADHAMS, N. Y.

(Vol. 2, No. 1)

1. Word Distortions in Schizophrenia. JAN NELKEN.
2. Contributions to Infantile Sexuality. M. WULFF.
3. Psycho-Analytic Study of a Stutterer. B. DATNER.
4. Different Forms of Transference. WILHELM STEKEL.
5. Concerning "Directed" Dreams. S. FERENCZI.
6. Two Interesting Cases of Mistakes in Speech (Versprechen).  
ERNEST JONES.
7. The Mountain as Symbol. A. MAEDER.
8. A Contribution to the Subject of Infantile Sexuality. J. HARNIK.

1. *Word Distortions in Schizophrenia.*—Nelken refers briefly to the work which has been done in the analysis of the neologisms of dementia præcox and dementia paranoides and goes on to emphasize the fact that these new-formed and distorted words have in every



case hidden meanings which can be revealed by psycho-analysis. He gives several interesting analyses of neologisms formed by a male schizophrenic whose chief complexes had to do with incestuous thoughts concerning his mother and sister and hostile ones against his father. He concludes his article by quoting Jung's words that "in dementia præcox there exists no symptom which can be called psychologically groundless or without meaning."

2. *Contributions to Infantile Sexuality*.—Wulff refers to the work of Freud and his followers in demonstrating the existence of a sexual life in very young children which exists, not as the complicated instinct of the adult, but in the component instincts which eventually amalgamate to form the mature sexual life. He cites several cases from his own observation which strikingly substantiate the Freudian view of sexuality in children. The latter part of his article is devoted to following in considerable detail three cases of convulsive seizures simulating epilepsy in children from eight to ten years of age. The causes of these he traces in partial analyses to premature and over-intense development of the sexual instinct caused by environment and other influences followed by excessive onanism. The development of anxiety (Angst) in these cases is also touched upon.

3. *Psycho-Analytic Study of a Stutterer*.—This author gives in sufficient detail to be readily followed the salient points in the psycho-analysis of a man of thirty-six years who had a pronounced impediment in his speech. The starting point in his trouble was revealed in a guilty conscience resulting from sexual aggressions committed when only a six-year-old boy against a four-year-old sister who later died. This guilty conscience with constant fear of discovery and punishment served as the underlying repression which drew in other events of his later life. The results of all these repressions were inhibitions in the speech function and other relations of life. These troubles disappeared in a surprising manner as the analysis proceeded. In a remarkably short time, the speech defect was almost entirely corrected and the patient rendered much more capable in other ways. An interesting point in this connection is the fact that the patient had previously taken treatment of a specialist in speech defects without appreciable benefit.

4. *Different Forms of Transference*.—Stekel emphasizes the importance to the psycho-analyst of recognizing the phenomenon of "transference" as soon as exhibited in a psycho-analytic treatment. He describes and illustrates briefly the most frequent forms which this transference takes and also mentions some of the more unusual kinds, as, transference to members of the physician's household and even to animals and objects of the same, as dogs, pictures, the dwelling

itself, etc. He also calls attention to the fact that transference may take place toward persons within the patient's own household, which requires the physician to keep a sharp lookout in all directions for this psychological phenomenon, since, for the success of the treatment, it must be at once recognized and dissolved as rapidly as circumstances permit.

5. *Concerning "Directed" Dreams.*—A brief discussion of certain peculiar dreams occurring at the time of awakening when the dreamer, wishing to stay asleep, seems able to guide his dreams to some extent, thus creating pretexts for not arising.

6. *Two Interesting Cases of Mistakes in Speech (Versprechen).*—Two excellent examples of the results of unconscious motives such as Freud has gathered in his "Psychopathology of Everyday Life."

7. *The Mountain as Symbol.*—Maeder cites a case in which mountain was used symbolically in the same way as by the old anatomists, viz., *mons veneris*.

8. *Infantile Sexuality.*—Citation of one case of a two-year-old boy.

(Vol. II, No. 2)

1. The Theory of the Freudian School. HAVELOCK ELLIS.
2. Discussion of the Genesis of the Delusion of Jealousy. HANS OPPENHEIM.
3. Divination and Psycho-Analysis. HERBERT SILBERER.

1. *Theory of the Freudian School.*—This well-known English investigator of the subject of sex briefly traces in this article the history of Freud's work and writings and sketches their fundamental principles. He pays a handsome tribute to Professor Freud as a man of genius who has contributed greatly to the understanding of the psychoneuroses and psychopathology in general and who has given us in psycho-analysis a new method of far reaching usefulness in investigating these and allied subjects.

2. *Genesis of the Delusion of Jealousy.*—Oppenheim calls attention to the frequency with which this delusion is encountered in alcoholism and in the course of various psychoses. He discusses the peculiarities of the delusion as to time and manner of appearance, duration, etc., and shows how all of these point to the fact that its roots are to be found not in the intellectual sphere but rather in the instinctive and further that the instinct involved is the instinct of sex. He refers briefly to the explanations of its origin given in the literature and finds these inadequate to explain the essence of the phe-

nomenon. Having given his reasons for attributing the origin of the delusion to the sexual instinct, he proceeds to describe more in detail how this comes about. He finds two tendencies active in creating the delusion: first, a polygamous (or polyandric) tendency, and second, a sadistic or sometimes combined sadistic-masochistic tendency. The former being repressed leads to transference of the patient's own repressed (unconscious) desires and feeling of guilt to his wife, *i. e.*, projection upon her of his own repressed wishes. The second or sadistic component accounts for many of the peculiarities of the delusion. A prerequisite for the development of this delusion is a very strong libido. The author sums up his article in these words: "Thus the delusion of jealousy results as an end-product of unconscious mental processes, the most important roots of which we find in the sadistic-masochistic instinctive forces and in a peculiar feeling of guilt in the individual."

3. *Divination and Psycho-Analysis*.—Silberer describes briefly the commonest methods formerly employed by priests, soothsayers, oracles and others to ascertain future events. In these, he finds two ways in which indefinite elements entered into the calculations, one when the chance depended on the forces of nature and another when the results depended on various involuntary acts of the person used as a medium, usually a boy, a virgin or a pregnant woman. In the latter class of cases in which there is plainly an opportunity for unconscious mental processes to enter in, the author finds an interesting field for psycho-analytic investigation. He says he has carried out such an investigation to some extent but not sufficiently far to justify publishing the results. He promises to give in a later article a description of his experiments.

(Vol. 2, No. 3)

1. Management of Dream Analysis in Psycho-Analysis. SIGMUND FREUD.
2. An Infantile Sexual Theory and its Relation to the Symbolism of Suicide. RUDOLF REITLER.
3. Analysis of a Dream of a Five-and-One-Half-Year-Old Boy. H. HELLMUTH.

1. *Management of Dream Analysis*.—In this little article, Freud gives some practical suggestions for analyzing dreams during the course of a psycho-analysis. When dreams are reported in such abundance that they cannot be analyzed during the consultation hour, he recommends that the analyst take up the new dreams related each day regardless of whether or not the analyses of the dreams of the



preceding day have been completed. This keeps the analyst in closer touch with the general progress of the case and prevents an accumulation of dreams which might block the work. In other words the analyst keeps better oriented regarding the complexes and resistances acting in the patient's mind. He points out further that by this method nothing of value from the unconscious is really lost, since the active pathogenic material continually reasserts itself in different forms and scenes.

Freud also condemns as superfluous the practice of urging the patient to write down his dreams as soon as appreciated; he says that this procedure serves to disturb the patient's sleep, makes him unduly solicitous about dreaming and often fails of its purpose by presenting a written text to which no associations will come when it is considered later.

2. *Infantile Sexual Theory and Symbolism of Suicide*.—Reitler reports the case of an unmarried woman of forty-two favorably influenced by psycho-analysis who presented the following symptoms: (1) Frequency of urination so excessive as to almost prevent patient from mingling in society; (2) excessive obsessional onanism; (3) a prolonged and obstinate insomnia which caused the greatest subjective disturbance. The report deals mostly with the latter symptom. Besides tracing the origin of the insomnia to the repression of a curious infantile sexual theory, the author shows the connection between these phantasies and the suicidal phantasies of later adult life. The case is interesting both from a therapeutic and a psycho-analytic standpoint.

3. *Analysis of a Small Boy's Dream*.—This little analysis is a contribution to the subject of the development of psychoneurotic symptoms in children which was so much elucidated by Freud in his "Analysis of a Phobia in a Five-Year-Old Boy."

## CORRESPONDENCE

### LETTER FROM DOCTOR JUNG

It is most welcome news to learn of Doctors Jelliffe and White's foundation of a broadly planned journal, which aims at the compilation of general psychological literature, and which therefore may be expected to fill a gap that the existing forms of psychology have rendered painfully evident. Each of these forms deals with a special domain, such as philosophical psychology, which is largely transcendental, experimental or physiological psychology, which has been accused, not without cause, of being physiology rather than psychology, and medical psychology, which through the psychoanalytical method of Freud has now come to encroach freely upon the domain of normal psychology. The complex psychic phenomena are left practically unexplained by the first two forms of psychology, whereas the psychoanalytical method of medical psychology has started a line of inquiry which would seem to have a general range of application.

Two problems in particular are adapted to exert an activating effect upon normal psychology. One of these is the recently elaborated dynamic interpretation of the psychological experience, which endeavors to explain the psychic manifestations as equivalent energy transformations. The other problem is represented by symbolism, which comprises the structural analogy of the intellectual functions, in their onto- and phylogenetic evolution. Medical psychology naturally came closest to these problems, as being most likely to observe, examine and analyze the mode or origin of powerful affects or extraordinary psychic structures. The delusional structures of the insane; the illusions of the neurotic; and the dreams of normal as well as abnormal individuals have also afforded abundant opportunities for studying the remarkable analogies with certain ethnological structures.

In my paper on the "Changes and Symbols of the Libido," a faint attempt has been made at sketching these relations, not in order to propound a finished theory, which would be beyond me, but simply to stimulate further research in a direction which appears extremely promising. It is beyond the powers of the individual, more particularly of physicians, to master the manifold domains of the mental sciences which should throw some light upon the comparative anatomy of the mind. Hence I welcome as a most opportune plan the idea of

the editors to unite in their journal the contributions of competent specialists in the various fields. We need not only the work of medical psychologists, but also that of philologists, historians, archeologists, mythologists, folklore students, ethnologists, philosophers, theologians, pedagogues and biologists.

I am free to admit that this enterprise is ambitious and highly creditable to the liberal and progressive spirit of America. The collection of comparative material, to place on a firmer footing the available results of medical psychology, is an inviting task for the near future. Especially in the realm of symbolism, a wide territory is here opened up for students of the several mythologies and religions. Another task is set in the transference of the dynamic interpretation to the problems of the history of culture. The collaboration of all these forces points towards the distant goal of a genetic psychology, which will clear our eyes for medical psychology, just as comparative anatomy has already done in regard to the structure and function of the human body.

I wish the best of success to this new venture and trust that it will not fail to arouse an active interest also on the part of the non-medical faculties.

C. G. JUNG



## BOOK REVIEWS

THE MODERN TREATMENT OF NERVOUS AND MENTAL DISEASES: Edited by William A. White and Smith Ely Jelliffe. Published by Lea and Febiger, Philadelphia. Two volumes; pages 1683; price \$12 net.

This work marks a distinctive point in the literature of nervous and mental diseases. Neurology for many years had been stagnant, simply growing by accretions of new facts and not being revitalized by new viewpoints. The same thing was true, until a few years ago, of psychiatry, which was the most backward field in medicine, but which is now one of the most progressive. Under the influence of a comparatively few workers in neurology our fundamental concepts of the central nervous system are being slowly remodeled. Under the influence of many workers in psychiatry this whole branch of medicine has suddenly sprung to the fore-front of medical progress, and in the past ten years has developed a literature bewildering both in its complexity and in its quantity. Up to the present time no modern work in either one of these departments of medicine has adequately presented the results of this progress, except in so far as they applied to some relatively circumscribed problem. The present work is not only an effort to place at the disposal of the reader the recent accomplishments in these departments of medicine, but it is a further effort, and in this it is also distinctive, to place these newer facts before the reader with the object in view of serving as indications for therapeutic attack in individual problems.

The question of treatment in many nervous and most mental diseases has always been viewed from the standpoint of a profound pessimism. Nervous and mental diseases seemed, more than any other types, to be the very expressions of fate itself. It is the object of these volumes to combat this pessimism and to indicate lines of hopefulness which are too frequently lost sight of in the *laissez faire* attitude usually assumed towards these cases.

In considering the problem of treatment it is significant that the individual patient is no longer regarded as merely an empty shell. In this new work disease is not considered from the old-time standpoint that harks back to the middle ages, namely as something which armed cap a pie invades the organism from without, but is viewed as the result of the interaction between the organism and some inimical agency or agencies. The patient is considered not only as a biologi-

cal, but as a social unit, and it is realized that disease, far from being necessarily an individual problem, may have its roots in the social fabric. The problem of therapeutics is therefore attacked at all levels,—at the lowest physical level, it is reached typically through surgery; at the higher biochemical levels results may be secured by the use of drugs and by gland and sero-therapy; while at the psychological level psychoanalysis is the sharpest cutting tool, and at the still higher social level there come the instruments of law, of education, and of eugenics. Prophylaxis is constantly kept in mind, and means of prevention are discussed with reference to the various types of disease considered.

This new work is a comprehensive attempt to place before the reader a therapeutics of nervous and mental diseases considered in its broadest aspect. Such an attempt at this critical period in the history of neurology and psychiatry was necessarily fraught with great difficulties. This work has succeeded in dealing with these difficulties in a highly efficient way, and will undoubtedly stand for some years to come as containing the most authoritative utterances in this department of medicine.

FREUD'S THEORIES OF THE NEUROSES. By Dr. Eduard Hitschmann. Translated by Dr. C. R. Payne. *Nervous and Mental Disease Monograph Series*. No. 17. \$2.00. New York.

For one who would gain a rounded and coherent and at the same time intelligible view of the fundamentals of the Freudian psychology this work of Hitschmann's is to be recommended. It is the only work of its kind in any language and in its English translation, fortunately very well rendered, puts the reader in touch with the most original and penetrating ideas of the past decade. These relate not only to the psychoneuroses and psychoses but are ideas destined to play a large rôle in the interpretation of the development of thought and culture throughout the centuries.

Notice.—All manuscript should be sent to Dr. William A. White, Government Hospital for the Insane, Washington, D. C.

All business communications should be addressed to *The Psychoanalytic Review*, 64 West 56th Street, New York, N. Y.

# THE PSYCHOANALYTIC REVIEW

A JOURNAL DEVOTED TO AN  
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## ORIGINAL ARTICLES

### CHARACTER AND THE NEUROSES<sup>1</sup>

BY TRIGANT BURROW, M.D., Ph.D.

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When we consider the sentiments, the interests, the general attitude of mind, the qualities of heart—in brief, the personality of the individual who choosing to live his span of days within the cramped and gloomy walls of his self-appointed cell, has set around himself the barriers constitutive of the system of defense which we know as the neurosis, we find certain broad characterological trends that are of interest in their logical relation to that central factor which the fundamental principle of Freudian psychology assumes as basic in the production of neurotic disorders—the factor namely of an inherent mental *conflict*.

Whatever clauses of amendment students and co-workers with Freud may, in the cumulative light of investigation, deem it wise to add to the theoretical principles underlying the psychoanalytic system of psychotherapy, whether they lean to the conception of repression or regression, of infantile fixation or contemporary maladaptation, of congenital predisposition or of a primary Inzest-Trieb, this essential factor of an inherent disquiet and inner unrest, of a mind distraught with irreconcilable dissension will still remain the permanent and indisputable basis of the neurosis.

<sup>1</sup> Read at the third annual meeting of the American Psychoanalytic Association, Washington, D. C., May 9, 1913.



The terms "a nervous disorder" or "nervousness" immediately convey the idea of a state of restlessness, unhappiness, dissatisfaction, ill-adaptation, and all of these expressions contain, upon examination, the underlying idea of a mental conflict, of an inner psychic disharmony.

Psychoanalysis has shown this conflict to be traceable in every instance to the presence of primary, affective trends which are disavowed by the conventional, social ego. It has shown that this conflict consists of an inherent disaffection between organic craving and cultural aspiration; the elemental, biological impulse toward immediate erotic satisfactions meeting a rebuff from the side of the repressive, inhibitory tendency of the collective social consciousness.

Probably the chief stimulus to the evolution of consciousness, and later of self-consciousness, grew out of precisely this primary conflict—this original clash or disparity of interests between biologically related elements or individuals of a single social unit or group, as, for example, the conflict between parent and offspring within the unit presented in the primitive brood or family group.

The components of such familial aggregates had their points of contact in those common ethnic trends which are the biogenetic or the primitive-social. Wherever, in such a biological commonwealth, a conflict of interests arose, as that already cited, for instance, between parent and offspring, naturally the demands of the stronger constituent superseded those of the weaker and in the process of social development the satisfactions of the child became subsidiary to those of the parent and were gradually more and more curtailed or eliminated.

It is probably by virtue of this primary social mechanism whereby the elementary, immediate, egoistic or autistic quests were brought into sharp conflict with the unyielding outer world of reality and of social demand that there was quickened in the individual the primary sense of the social relation and—correlatively as it were, reflex to it—of the cognate sense of self. The conflict of the self with other and stronger selves was an uneven and futile one. The ego was at first compelled, through the exigencies of sheer physical force, to yield its demands for self-gratification to the outer, circumstantial restrictions set by

the larger social demands. Later, with the further evolution of consciousness, the social prohibition became more and more rationalized; the element of fitness, of expedience, of propriety began to prevail more and more, and thus the child became actuated by feelings of conscience, *i. e.*, of consciousness of obligation gradually imbued through the penalties of violation, and began to yield conformity to the newly awakened, if but dimly experienced, sense of group or social suzerainty, in virtue of a suasion representing the primary moral reaction. These reactions, as we have seen, are resultant upon the friction arising between the early egoistic and the social demands. In the original social relationship, as exemplified in that of mother and offspring, the relationship is not, for the primary, infantile psyche, truly social in the sense of being objective, as it comes to be later, but there is originally an identification of the object (the mother) with the primary ego; later, as was said, a differentiation takes place through the gradual entrance of obstacles which tend to emphasize more and more the other self or the non-ego and the derivative self or the secondary ego, and so is introduced the objective factor of experience, constitutive of the social relation, a relation which is thus not less social in respect to the self than in respect to others.

It is probable that in some such statement is to be found the biological genesis of the basic factor of repression. For since social consciousness owes its stimulus to the discomforting contrast between the autosocial and the heterosocial demands resulting from the restrictions set upon the ego by the exactions of the group or social censor; since social consciousness is the outgrowth of the moral interaction between inner and outer, autistic and social, phantastic and actual, unconscious and conscious biological trends, it follows that the factor of repression, whereby this intrapsychic conflict is actuated, is coextensive with social consciousness.

We see then that the mechanism of repression is essentially a social reaction, and we have already seen that this primary social reaction comes early to be a moral reaction. For, as has been said, the moral sense is but an outgrowth of the social consciousness. *Repression therefore is biologically a moral reaction.*

Therefore in dealing with the reaction of repression we are dealing with a reaction that is moral, and this truth is brought home most forcibly to those who are concerned with the treatment of individuals whose condition is due precisely to a mis-carriage of repression—namely, patients suffering from a neurosis.

Whether it is a question of the vicarious impulses and imperatives belonging to the obsessional states; or of the characteristic somatic alternatives of hysteria; or of the mitigating substitutions and replacements constitutive of paranoid mechanisms; or of the organic equivocations of the anxiety dissociations; or of the exaggerated mood-reactions presented in the temperamental subterfuges of cyclothymia; or of those manifold metabolic mimics grouped under the ample category designated by the popular misnomer of "neurasthenia"—under whatever *alias* the organism may seek to elude the demand most vital to it, at the heart of the neurosis the essential situation is a *moral revulsion*.

This revulsion is directed unfailingly against the admission of primary, egoistic, organic, unconscious sexual trends. As we know, through psychoanalytic research, the different neuroses represent but varying outcomes of a fundamental effort of evasion, but the stimulus to such evasion, being essentially a reaction against prohibition, is based in every instance upon a primary, biological intuition of *right and wrong*. This is the tree of knowledge of good and evil of which one is commanded not to eat, as we were told long ago in the symbolic legend of Genesis. The neurosis then is a biologically moral integration, for it contains the assertion of the organism's innermost verity. The thesis offered here maintains then that the neurotic character is *an organically moral character*.

Now we further maintain that this organic morality is an earnest of the inherent moral value of the unconscious personality. For the fact that this underlying moral trend is organic and therefore unconscious, blind and unreasoning, does not make it, of its essence, less moral, but indeed rather more moral, for being organic and unconscious it is the more native, spontaneous and inherent. It is of course admitted that this unconscious repression or moral evasion is not economically wise. It is essentially nihilistic, leading to inevitable disaster. But however



destructive the method may be, yet the very presence of this inherent, moral element within the organism bespeaks a characterological trend that may become an economic asset of the utmost importance for the body-social.

The essential moral situation present in the neuroses, the inherent conflict of good and ill, is then the dominant picture in these disorders. We have all witnessed the touchingly pathetic spectacle of a young man or woman, moving among his fellows in the grip of a great, elemental passion, against which his innermost will is staunchly, fiercely yet ineffectively set, enduring alone, in silence and dismay, an anguish that knows no abatement. For he is in a sense a mere detached and helpless onlooker. Failing to understand his unrelenting agony, experiencing the poignancy of his affliction, as it were, only from without, he yet vaguely senses the awful moral tragedy of the conflict within him and so, like a guilty thing, he slinks away from men, a self-distrusting, self-accusing alien, filled with the utmost sense of unworthiness and inadequacy, a prey to hideous dread and fears, alive to every suspicion of evil, dead to every hope of comfort yet, however racked with mental woe, bearing still within his bosom the ineffaceable marks of a courage that endures.

This moral character of the struggle undergone by the neurotic patient with the innate conscientiousness which it attests and its characterological relationship to the basic principle of repression is too obvious to require insistence. But there are, besides, certain broadly characteristic traits that seem to be interestingly related to this elemental reaction and to the broader factors assumed by Freud as primarily operative in the production of the neuroses.

We are here disregarding entirely the relationships to be observed from the standpoint of symptomatology as well as the definite characterological trends representing sublimations of the more specific erogenous fixations as pointed out long ago by Freud, as it is our purpose to consider, briefly, only those general social and ethical sentiments and tendencies which seem correlated with the original biologically moral and social reactions in which the neurosis has its roots.

A frequent type well illustrates these characteristics as we come to know them in the study of the neuroses. Conspicuous

in the patient of this type is a certain child-like simplicity, a lack of confidence in himself combined with a readiness to exaggerate the importance of other people. Showing doubt and distrust of himself and of all that he does, he tends to overestimate the work of others. He is fearful of being misunderstood, of impressing unfavorably those about him. He is especially timorous towards persons occupying positions of authority, as he unconsciously places them in strongest contrast to himself, and best reincarnates in such persons the unconscious image of the father. The neurotic patient possesses, too, a nature that is full of gentleness. Yearning always for the pleasant security he once knew in the perfect union of the maternal love, there is in him a certain wistful tenderness and unfulfilment, in consequence of which his nature is deeply sympathetic. In his affections he is constant, for carrying always, as he does, within his bosom the image of the complete infant love, his nature is set as it were to a standard of inherent loyalty. Further, because of the wound he has suffered through his early unconscious infantile renunciation, his nature is softened, mellowed and refined.

It is here in part that we find the explanation of the neurotic's abiding love of beauty, especially of the sort of beauty that is, as we say, appealing in its naturalness and simplicity, such as the beauty of flowers, of little children, of a pleasant landscape. And as his love for children is called forth by their immature simplicity, so he possesses understanding and sympathy for others who, like himself, are also unconsciously detained in an early, infantile, psychic mode—the individuals whose lives are repressed, inhibited, neurotic like his own. This is well illustrated in the unconscious affinities which lead so frequently to marriage between neurotic persons.

As a further consequence of the introversion of the neurotic, of the folding back within itself of his interest or libido, of the mind's reversion upon itself, the individual acquires the mental habit of living within and in relation to himself.

On this account the neurotic patient is preëminently intuitive, psychological; that is, he has a striking aptitude for putting himself in the internal situation of another. He knows without knowing why he knows. Proceeding upon the evidence of internal feeling rather than of external proof, he is actuated far

more by intuitive perception than by intellectual deduction. For he is one who trusts his first impressions, knowing that they are always right.

Holding as he does to the unconscious phantasies of the primary ego, reality becomes the hobgoblin of the neurotic. He prefers to reside within the fluid domain of his feelings rather than to exploit the outer world of unyielding solidarity. However remote from the primary mother-complex such a characterological reaction may appear, its biological origin is unmistakably indicated in concrete instances taken from actual analysis. One patient for example who well illustrates the neurotic characterology, at heart a student of metaphysics and of speculative philosophy, though outwardly a hard, shrewd, matter-of-fact promoter of business enterprise, recalls how, in his very early teens, it was his especial delight to fancy to himself the philosophical condition represented by the complete cessation of flux, it being expressed by a longing to enter the quiet waters of some hidden cove—a fancy that was recalled by a dream image in which the same wish fulfilment—the return to the uterine sleep—was analogously symbolized.

The neurotic is imaginative, philosophical, artistic, interpretative, temperamental rather than literal, methodical, critical, mechanical, deductive. If he lacks the scientific capacity of session he compensates by a quicker philosophical insight.

It is a long theme—this of the meaning of the characterological import in the neuroses. There is much else that may be readily related to the basic circumstance of repression which causes the blocking of the personality as we see it in neurotic disorders, but the question of most vital interest is the bearing of all this character reaction upon the practical problem of the patient's ultimate rehabilitation.

We have seen that fundamental in the neurotic character is the sense of obligation, the moral sense or the love of truth as inculcated through the stolid organic repression of natural desire, with all the suffering it entails, out of obedience—albeit an unconscious, blind and unreasoning obedience—to organic law as decreed through biological social prohibition. With a mechanism then essentially moral and social at the basis of the characterological reaction present in the neuroses, the logical adaptation



for the neurotic patient would seem to lie in the direction of interests which permit the exercise of those faculties which subserve the highest moral and social ends.

It seems to me, therefore, that psychoanalysis ought to be accompanied by or supplemented with such reëducative influences as will stimulate our patients to an effective interest in the social and educational problems upon which depend the happiness and efficiency of the social community. Imbued by nature, as we have seen, with a love of truth, a respect for law, a sympathy for their kind, and a reverent sense of the value, the beauty and the dignity of life, these neurotic men and women, who have faced unflinchingly the rigors of their own analysis, are above all others adapted to the high task of teaching and serving mankind.

Having learned the organic truths of life through his own mental stock-taking, having recognized that his own neurosis consisted in the repression of these elemental truths and having seen that his own mental conflict grew out of his unconscious and irrational adaptation toward moral and social inhibitions, certainly no one is better qualified than the patient who has undergone psychoanalysis, to take an intelligent part in the moral and social problems of the community—problems which he must clearly see are approached from a standpoint of equally unconscious and irrational undercurrents of resistance on the part of the social polity—for through his analysis he has come to accept the truth that is in him, and through the courage born of a great moral conflict he is prepared to utter it.

# THE WILDISBUCH CRUCIFIED SAINT

## A STUDY IN THE EROTOGENESIS OF RELIGION<sup>1</sup>

BY THEODORE SCHROEDER

OF NEW YORK CITY

In a valley on the road to Winterthür, Switzerland, lies the insignificant hamlet of Wildisbuch. Here, at the beginning of the last century, in an isolated farmhouse, lived John Peter, widower, with several children. His only son, Casper, married in 1812, and, after being blessed with five daughters, was divorced from his wife. Barbara, a daughter of John Peter, was married to a blacksmith in Trüllikon. The other daughters were Susanna, Elizabeth, Magdalena (married to John Moser, a shoemaker), and Margaret, born in 1794, the youngest and favorite child.

It may be well to remember in what follows that intellectual precocity is a frequent accompaniment and perhaps a symptom of premature sexual awakening. Margaret was a *precocious infant*, who at six was able to read her Bible, and would summon the family about her to listen to her lectures out of the "*sacred volume*," and would *pray and exhort* with great ardor. Her purposeless family, her intellectual superiority and certain mystical circumstances contributed to her mastery. To her simple

<sup>1</sup> This paper is part of a series which I am preparing. Other essays of mine upon this same subject may be found as follows: "The Erotogenesis of Religion," *Alienist and Neurologist*, Vol. 28, p. 330, Aug., 1907; "Sex-determinant in Mormon Theology," *Alienist and Neurologist*, Vol. 29, p. 208, May, 1908; "Religion and Sensualism as Connected by Clergymen," *Amer. Jour. of Relig. Psychology*, Vol. 3, p. 17, May, 1908; "Development of a Working Hypothesis," *Alienist and Neurologist*, Vol. 34, 1913; "Mathias the Prophet," *Journal of Religious Psychology*, Vol. VI, pp. 59-65, Jan., 1913; "Adolescence and Religion," *Journal of Religious Psychology*, Vol. 6, p. 124, April, 1913; "Erotogenese der Religion," *Zeitschrift für Religionspsychologie*, March, 1908; "The Erotogenetic Interpretation of Religion; Its Opponents Reviewed," *Journal of Religious Psychology*, January, 1914.

family the mere fact that *she was born on Christmas* suggested the possession of special privileges and graces.

In 1816 Margaret Peters went as a housekeeper to her mother's brother, a small farmer at Rudolfsingen. Everything prospered under the "ministering child." Now the holy maiden of twenty attended prayer-meeting and scripture expositions by the Pietists of Schaffhausen. The consequent deepening of religious emotion was accompanied by the usual depression of spirits, which frequently accompany also sexual suppression. These she explained by saying that God was revealing himself to her more and more every day so that she was daily becoming more conscious *of her own sinfulness*. In adolescent children about the only impulse they have which receives general condemnation is the sex impulse. Therefore a growing consciousness of sinfulness signifies a growing consciousness of sexual desire and of its social taboo. In twelve months she felt a call to preach, testify and prophesy. She accordingly left her uncle, returned to Wildisbuch in March, 1817, and began operations as a revivalist.

To the paternal household had been added a farm-hand, named Heinrich Ernst, and a young woman, Margaret Jäggli. The latter's "immoralities" had caused her to be turned out of her native village. She had epileptic fits, which are so often traceable to sexual causes and which a century ago were so readily explained as demoniac possession. Of this affliction she hoped to be cured by the saintly Margaret. It is well known among specialists that a whole class of sufferers from epileptiform seizures has been differentiated as due to sex-suppression, and other sexual disorders. Another new inmate was Ursula Kündig, a maid of all work aged nineteen. A disappointing love affair brought her into strained relations with her parents, so she accepted Margaret as a "spiritual adviser" during life. The unhappy Ursula was as wax in the hands of our saintess, and she venerated her as the elect of the Lord, professing her unshaken conviction "that Christ revealed himself in the flesh through her and that through her many thousands of souls were saved." Margaret, the high priestess of mysticism, now gave instruction, guidance and enlightenment to all those who were so "spiritually" minded that the Zwinglian parish church could not satisfy their deeper "soul-hunger."



"The mysticism of the old heathen world, the mysticism of the gnostic sects, the mysticism of mediaeval heretics, almost invariably resolved itself into orgies of licentiousness." By this road our present prophetess was presently to realize her heaven.

In the autumn of 1817, Margaret of Wildisbuch met Julianne von Krüdner, the head of another revivalist movement.

The latter was born of noble family in 1766 and grew up without religion. At fourteen she was married to Baron von Krüdner, the Russian Ambassador, at Venice, he being very much older. Her notorious "immoralities" compelled her to return to her father's house at Riga. Dissatisfied with this quiet life, she went to St. Petersburg and to Paris, and "threw herself into every sort of dissipation." In her novel, "Valerie," she frankly avowed that women when young must give themselves up to pleasure, then take up with art, and finally, when nothing else is left, devote themselves to religion. At forty she entered the final phase.

She travelled much in quest of converts. At Karlsruhe she threw herself heart and soul into the Pietist movement. In 1814, she attained access to the Russian court with such great effect upon Czar Alexander I. that he entreated her to go to Paris with him. When he tired of her she went to Basle. Her revivals were well attended, and followed by so many domestic quarrels that everywhere she came into conflict with the police, being at last sent back to Russia. In 1824, she went to the Crimea to start a colony on the Moravian settlement plan, but died before success came.

In 1817, while engaged in her apostolic mission, along the Rhine, she met Margaret of Wildisbuch. When the unregenerate police compelled holy Julianne to leave, she commended her disciples to the blessed Margaret. Thence a regular pilgrimage of the devout set in to Wildisbuch.

Margaret's influence at home increased. Her sister, Magdalena, and brother-in-law, John Moser, as the first token of their conversion, kicked their old mother Moser out of the house, because she was "worldly" and void of "saving grace." Conrad, John Moser's younger brother, was starved until he yielded to their fancies, saw visions, and professed himself saved. Barbara, also being converted, and unable to regenerate

her obdurate husband, attached herself to a kindred soul of like soaring piety, a tailor named Hablützel. Margaret's brother, Casper, was separated from his wife, whom he treated brutally. He became the father of a bastard, and now loafed about the country preaching the gospel. Margaret now became a roving apostle. She met, converted and loved Jacob Morf, the cobbler of Illnau, whose wife at times interrupted their honeymoon. When parted, Margaret's letters to him were a mingling of the most passionate love and sickly pious twaddle. When Morf's wife told her husband that one of these seemed to her unenlightened mind to be very much like a love-letter, the cobbler impatiently protested: "Nothing of the sort. It speaks of spiritual affection only."

Margaret's lapses from conventional rectitude served only to drive her further in her mad career of self-righteous exaltation. From considerations of delicacy, she, however, thought it best to retire from the world accompanied by her sister Elizabeth. After months she reappeared, white, weak and prostrate with sickness, soon to be followed by cobbler Morf. He declared that he had been led thither because the prophetess had revealed to him that it was the will of heaven that without tasting death they should ascend together into the mansions of the blessed, and occupy one throne for all eternity.

Margaret now laid aside her pilgrim's staff, and remained day after day in her room with the shutters closed, meditating, reading the Bible, and writing to her "dear child" the cobbler. Her transgressions and the consequent penalties were but crosses laid upon her shoulders by God. She wrote: "The greater the humiliation and shame we undergo, and have to endure from our enemies here below, the more unspeakable our glorification in heaven."

At evening there was preaching and receiving of visitors. The entire house was given over to religious ecstasy, of progressive intensity. Our saintess frequently warned the household of an approaching trial of their faith. Sexual hyper-esthetism seemingly converted to religious emotion apparently was now developing to a mania for *cruelty*, such as is sometimes produced by unsatisfied sex-longing. Once she asked whether they were ready to lay down their lives for Christ? "Behold! I

see the host of Satan drawing nearer and nearer to encompass me. He strives to overcome me. Let me alone that I may fight him." Then she flung her arms about and struck in the air with her open hand. The time had arrived for her to systematize her vagaries and to attempt their rationalization. More and more the idea became fixed that the devil was captivating an increasing number of souls, and that her resistance alone stood in the way of his complete supremacy. The obedience which within the household had been yielded to her became less and less doubtful. All the worldly-minded, such as the parish pastor, were excluded from the house. Everything was viewed in a "spiritual" light.

The explosion of a pine knot in the stove would cause a panic. Upon such an occurrence, Jäggli jumped up throwing over her spinning wheel, and shrieked out: "He will fetch me." She fell convulsed upon the floor, foaming at the mouth. When Margaret entered, Jäggli shrieked out: "Pray for me! Save me! Fight for my soul!" The saint's spiritual exercises, and mandates for the devil's departure, accomplished a restoration. The character of this seizure confirms the suspicion that Margaret Jäggli's affliction was of a functional nature (psycholeptic).

One day the maid had an especially bad epileptic fit. Around her bed stood old John Peter, Elizabeth and Susanna, Ursula Kündig and John Moser, as well as the Saint Margaret who was fighting the evil one with her fists and her cries, when John Moser fell into ecstasy, and saw a vision of Christ and Satan exhibiting an account book showing the latter's claims on the soul of Jäggli. Satan it was now believed had made himself a nest under the roof of their house.

The last desperate conflict of faith and spiritual arms was at hand. The derangement was developing speedily to the extreme acuteness of bloody extermination. The final battle, of course, could not be fought without the presence of the dearly beloved cobbler Jacob, and he was invited to come to the great and last struggle, arriving Saturday, March 8, 1823. On Monday came also John Moser, his brother Conrad, also her brother Casper Peter. The wind having been sown the reaping of the whirlwind was about to begin.

On Monday all were assembled in solemn anticipation of the



bugle call, but none was heard. On Tuesday some went about their daily work, others gathered about Margaret in silent prayer. Occasionally the hush of the darkened room was broken by a wail from the saint. "I am sore straightened! I am in anguish! But I refresh my soul at the prospect of the coming exaltation!" or, "My struggle with Satan is severe. He strives to retain the souls which I will wrest from his hold; some have been for two hundred years in his power!"

The pictures which were forming in this disordered imagination are but dimly revealed. This much is extremely probable: that Satan's attack was but the religious interpretation of acute depression, and something was prompting toward a delirium of blood, which in this disordered mind was to be interpreted as the conquering grace of God, overpowering Satan.

On Tuesday and the following days these holy ones hardly left the room of the pale, striving ecstatic. The holy enthusiasm was general. None dared to contest the will of the prophetess. When evening came, all ascended to the upper room where she declared: "Lo! I see Satan and his first-born floating in the air. They are dispersing their emissaries to all corners of the earth to summon their armies together." Elizabeth also saw them. After the holy maid had been for an hour in her mysterious silence, the crisis seemed temporarily past, and all retired.

On Wednesday, after a forenoon of prayer, Margaret was again seized with the spirit of prophecy, and declared: "The Lord has revealed to me what will happen in the latter days. The son of Napoleon will appear before the world as anti-Christ, and will strive to bring the world over to his side. He will undergo a great conflict, but what will be the result is not shown me at the present moment; but I am promised a spiritual token of this revelation." The token followed. The dearly loved Jacob, John Moser, and Ursula Kündig cried out that they saw two evil spirits, one in the form of Napoleon, pass into Margaret Jäggli, and the other, in the form of his son, enter into Elizabeth. Whereupon Elizabeth, thus possessed, began to strut and assume a haughty military air, such as she deemed appropriate to her military "control." When the prophetess overcame and expelled these devils, the possessed gave up her military flourishes.

After several "spirit wrestlings" during the following day,

the evening again found all assembled in the upper room. As soon as the prophetess had taken her seat on the bed, she declared: "Last night it was revealed to me that you are all of you to unite with me in battle with the devil, lest he should conquer Christ. I must strive lest your souls and those of so many others should be lost. Come, then! Strive with me; but first of all, kneel down, lay your faces in the dust and pray." All obeyed. From her throne on the bed, the prophetess presently exclaimed: "The hour is come in which the conflict must take place, so that Christ may gather together his church, and contend with anti-Christ. After Christ has assembled his church, 1,260 days will elapse, and then anti-Christ will appear in human form, and with sweet and enticing words will strive to seduce the elect; but all true Christians will hold aloof." After a pause, she added solemnly: "In verity, anti-Christ is already among us."

Then, with a leap she was off the bed, and turning her eyes about, throwing up her hands, rushing about the room, striking the chairs, and clothes-boxes with her fists, she cried, "The scoundrel, the murderer of souls!" And finding a hammer, she began to beat the wall with it. The company looked on in breathless amazement. The epileptic Jäggli went into convulsions, writhed on the ground, groaned, shrieked, and wrung her hands. Then the holy Margaret cried, "I see in spirit the old Napoleon gathering a mighty host, and marching against me. The contest will be terrible. You must wrestle unto blood. Go! fly! fetch me axes, clubs, whatever you can find. Bar the doors, curtain all the windows in the house, and close every shutter."

Whilst her commands were being fulfilled in all haste, and the required weapons were sought out, John Moser, who remained behind, saw the room "filled with a dazzling glory, such as no tongue could describe," and he wept for joy. The excitement had already mounted to visionary ecstasy. It was five o'clock when the weapons were brought up stairs. The holy Margaret was then seated on her bed, wringing her hands, and crying to all to pray, "Help! help! all of you, that Christ may not be overcome in me. Smite, smite, cleave,—everywhere, on all sides—the floor, the walls! It is the will of God! Smite on till I bid you stay. Smite and lose your lives, if need be."

It was a wonder that lives were not lost in the extraordinary

scene that ensued; the room was full of men and women; there were ten of them armed with hatchets, crowbars, clubs, pick-axes, raining blows on walls and floors, on chairs, tables, cupboards and chests. This lasted for three hours. Margaret remained on the bed, encouraging the party to continue; when any arm flagged she singled out the weary person and exhorted him, as he loved his soul, to fight more valiantly and utterly defeat and destroy the devil. "Strike him! cut him down! the old adversary! Fear nothing! Smite till your blood runs down as sweat. There he is in the corner; now at him," and Elizabeth served as her echo, "Smite; strike on! He is a murderer, he is the young Napoleon, the coming anti-Christ who entered into me and almost destroyed me."

This continued until all the furniture was demolished, and one wall of the house had been broken down so as to expose to the gaping crowd without what was occurring within the sacred sanctuary. When the saint beheld the crowd, she shrieked forth, "Behold them! the enemies of God! the host of Satan coming on! but fear not, we shall overcome." When her warriors were so exhausted that they could not raise their arms, nor even stand up, Margaret exclaimed, "The victory is won; follow me." Down stairs, with drawn curtains to exclude the vulgar gaze, and in the illumination of a rushlight, the battle was continued with altered tactics. By her command, all threw themselves upon the ground and prayed, and after an hour's rest the former scene was re-enacted. The holy Margaret ordered her prostrate worshippers to beat themselves with their fists on their heads and breasts, and they obeyed. Elizabeth yelled, "Oh! Margaret, do thou strike me! Let me die for Christ." Thereupon the holy one struck her sister repeatedly with her fists, so that Elizabeth cried out with pain. "Bear it!" exclaimed Margaret, "It is the wrath of God!"

The prima donna of the whole melodrama in the meanwhile looked about her to see that none of the actors spared themselves. When she saw anyone slack in his self-chastisement, she called to him to redouble his blows. As the old man did not exhibit quite sufficient enthusiasm in self-torture, she cried, "Father, you do not beat yourself sufficiently!" and then began to batter him with her own fists. The ill-treated old man groaned



under her blows, but she cheered him with, "I am only driving out the old Adam, Father! It does not hurt you!" and redoubled her pomelling of his head and back. Then out went the light.

At midnight a policeman, who had in the meantime been put on guard without, heard a renewal of the disturbance within. He heard muffled cries of "Save us! Have mercy upon us! Strike away! he is a murderer, spare him not!" etc. The Amtmann's demand for admission having received no attention, a window pane was broken and a lighted candle was thrust into the room. The officer's report follows:

"I now went to the opened window and observed four or five men standing with their backs against the door. Another lay as dead on the floor. At a little distance was a coil of human beings, men and women, lying in a heap on the floor, beside them a woman on her knees beating the rest, and crying out at every blow, 'Lord, have mercy!' Finally, near the stove was another similar group." Here one suspects that the impulse towards sadism and masochism are undifferentiated and sanctified, but we must await further developments. The Amtmann ordered the sittingroom door to be broken open. Conrad Moser, who had offered to open to the magistrate, was rebuked by the saint, who cried out to him: "What, will you give admission to the devil?" In his report the magistrate continues: "The men offered resistance, excited thereto by the women, who continued screaming. The holy Margaret especially distinguished herself, and was on her knees vigorously beating another woman who lay flat on the floor on her face. A second group consisted of a coil of two men and two women, the head of one woman on the body of a man, and the head of a man on that of a girl. The rest staggered to their feet one after another. I tried remonstrances, but they were unavailing in the hubbub. Then I ordered that old Peter be removed from the room. Thereupon men and women flung themselves upon him, in spite of all our assurances that no harm would be done him. With difficulty we got him out of the room, with all the rest hanging on him, so that he was thrown to the floor, and the rest clinging to him, tumbled over him in a heap. I repeated my remonstrance, and insisted on silence, but without avail. When old Peter prepared to answer, the holy Margaret stayed him with, 'Father, make no reply. Pray!' All then re-

commenced the uproar. Margaret cried out: 'Let us all die! I will die for Christ!' and others, 'Have mercy on us!'"

In spite of all police efforts, Margaret and the others continued to exhort and comfort one another through the night. Next morning each was brought before the magistrate and subjected to examination. All were sullen, resolute, and convinced that they were doing God's will. As the holy Margaret was led away for examination, she said to Ursula and the servant Heinrich, "The world opposes, but cannot frustrate my work." Her words came true: the "world" was too slow in its movements.

After the investigation, and pending an order directing that Margaret and Elizabeth should be sent to an asylum, the final scene was enacted. As soon as the high priestess had come out of the room where she had been examined by the Amtmann, she went to her own bed-chamber, where boards had been laid over the gaps between the rafters broken during the previous night by the axes and picks. Elizabeth, Susanna, Ursula, and the maid sat or stood around her and prayed. There were more "spirit wrestlings" and a comparatively peaceful, but temporary conquest of the devil.

At ten o'clock, the old father, his five daughters, his son, the two brothers, John and Conrad Moser, Ursula Kündig, and the maid Jäggli, and the man Heinrich Ernst, twelve in all, were assembled in the upper room. Margaret and Elizabeth sat side by side on the bed, the latter half stupified, looking fixedly before her. Margaret, however, was in a condition of violent nervous sur-excitation. Many of the weapons used in wrecking the furniture lay about; among these were the large hammer and an iron wedge used for splitting wood. All there assembled felt that something extraordinary was about to happen. Every one in that group had passed the line that divides healthy common-sense from mania.

Margaret now solemnly announced, "I have given a pledge for many souls that Satan may not have them. Among these is the soul of my brother Casper. But I cannot conquer in the strife for him without the shedding of blood." Thereupon, she bade all present renew the beating of themselves with their fists, so as to expel the devil, and they executed her orders with wildest fanaticism.

The holy maid now laid hold of the iron wedge, drew her brother Casper to her, and said, "Behold, the Evil One is striving to possess thy soul!" and thereupon she began to strike him on head and breast with the wedge. Casper staggered back; she pursued him, striking him and cutting his head open, so that he was covered with blood. As he afterwards declared, he had not the smallest thought of resistance; the power to oppose her seemed to be taken from him. At length, half stunned, he fell to the ground, and was carried to his bed by his father and the maid Jäggli. The old man did not return upstairs, and was not present at the terrible scene that ensued. But he took no steps to prevent it. Not only this, but he warded off all interruption from without.

A little later in the upper room the melodrama of former days had been changed to tragedy. As soon as the wounded Casper had been removed, the three sisters, Barbara, Magdalena, and Susanna, left the room, the two latter, however, only for a short time. Then the holy Margaret said to those who remained with her, "Today is a day of great events. The contest has been long and must now be decided. Blood must flow. I see the spirit of my mother calling me to offer up my life." After a pause she added, "And you—all—are you ready to give your lives?" They all responded eagerly that they were. Then said Margaret, "No, no; I see you will not readily die. But I—I must die." Thereupon Elizabeth exclaimed, "I will gladly die for the saving of the souls of my brother and father. Strike me dead, strike me dead!" Then she threw herself on the bed and began to batter her head with a wooden mallet. "It has been revealed to me," said Margaret, "that Elizabeth will sacrifice herself." Then taking up the hammer, she struck her sister on the head. At once a "spiritual" fury seized on all the elect souls, and grasping weapons they proceeded to beat the poor girl to death. Margaret in her mania, struck at random about her, and wounded both John Moser and Ursula Kündig. Then she suddenly caught the latter by the wrist and bade her kill Elizabeth with the iron wedge. Ursula shrank back, "I cannot! I love her too dearly!" "You must," screamed the saint; "it is ordained." "I am ready to die," moaned Elizabeth. "I cannot! I cannot!" cried Ursula. "You must," shouted Margaret, "I will raise my sister again,



and I also will rise again after three days. May God strengthen your arm!"

As though a demoniacal influence flowed out of the holy maid and maddened those about her, all were again seized with frenzy. John Moser snatched the hammer out of her hand, and smote the prostrate girl with it again and yet again, on head and bosom and shoulders. Susanna brought down a crow-bar across the body, the man-servant Heinrich belaboured her with a fragment of the floor planking, and Ursula, swept away by the current, beat in her skull with the wedge. Throughout the turmoil, the holy maid yelled: "God strengthen your arms! Ursula, strike home! Die for Christ, Elizabeth!" The last words heard from the martyred girl were an exclamation of resignation to the will of God, as expressed by her sister.

Margaret sat beside the body of her murdered sister, the blaze of "spiritual" (sex?) ecstasy in her eyes, the blood-stained hammer in her right hand, terrible in her inflexible determination, and in the demoniacal energy which was to possess her to the last breath she drew. Her bosom heaved, her body quivered, but her voice was firm, and her tone authoritative, as she said, "More blood must flow. I have pledged myself for the saving of many souls. I must die now. You must crucify me." John Moser and Ursula, shivering with horror, entreated, "O do not demand that of us." She replied, "It is better that I should die than that thousands of souls should perish."

So saying she struck herself with the hammer on the left temple. Then she held out the weapon to John Moser, and ordered him and Ursula to batter her with it. Both hesitated for a moment.

"What!" cried Margaret, turning to her favorite disciple, "will you not do this? Strike, and may God brace your arm!" Moser and Ursula now struck her with the hammer, but not so as to stun her.

"And now," said she, with raised voice, "crucify me! You, Ursula, must do the deed."

"I cannot! I cannot!" sobbed the wretched girl.

"What! will you withdraw your hand from the work of God, now the hour approaches? You will be responsible for all the

souls that will be lost, unless you fulfill what I have appointed you to do."

"But Oh, not I!—" pleaded Ursula.

"Yes,—you. If the police authorities had executed me, it would not have fallen to you to do this, but now it is for you to accomplish this work. Go, Susan, and fetch the nails, and the rest of you make ready the cross."

In the meantime, Heinrich, the man-servant, frightened at what had taken place, and not wishing to have anything more to do with the horrible scene in the upper chamber, had gone quietly down into the woodhouse, and was making stakes for the vines. There Susanna found him, and asked him for nails, telling him for what they were designed. He composedly picked her out nails of suitable length, and then resumed his work of making vine stakes. Susanna re-ascended to the upper room, and found Margaret extended on the bed beside the dead body of Elizabeth, with the arms, breast, and feet resting on blocks of wood, in the fashion of a cross, arranged by John Moser and Ursula, whilst Susanna was absent.

The hands and feet of the victim were nailed to the blocks of wood. Then Ursula's head swam, and she drew back. Again Margaret called her to continue her horrible work. "Go on! go on! God will strengthen your arm. I will raise Elizabeth from the dead, and rise myself in three days." Nails were driven through both elbows and also through the breasts of Margaret; not for one moment did the victim express pain, nor did her courage fail her. No Indian at the stake endured the cruel ingenuity of his tormentors with more stoicism than did this young woman bear the martyrdom she had invoked for herself. She impressed her murderers with the idea that she was endowed with supernatural strength. They imagined that it could not be otherwise, for what she endured was beyond the measure of human strength. That in the place of human endurance she was possessed with the Berserker strength of the *furor religiosus*, was what these ignorant peasants could not possibly know. Conrad Moser could barely keep himself from fainting, sick and horror-struck at the scene. He exclaimed, "Is not this enough?" His brother, John, standing at the foot of the bed, looked into space with glassy eyes. Ursula, bathed in tears, was bowed over the

victim. Magdalena Moser had taken no active part in the crucifixion; she remained the whole time, weeping, leaning against a chest.

The dying woman smiled. "I feel no pain. Be yourselves strong," she whispered. "Now, drive a nail or a knife through my heart."

Ursula endeavored to do as bidden, but her hand shook and the knife was bent. "Beat in my skull!" these were the last words spoken by Margaret. In their madness Conrad Moser and Ursula Kündig obeyed, one operating with the crowbar, and the other with the hammer.

It was noon when the sacrifice was accomplished—dinner-time. Accordingly, all descended to the sittingroom, where the meal that Margaret Jäggli had been in the meantime preparing was served and eaten.

On Sunday, the 16th, the servant, Heinrich, was sent on horseback to Illnau to summon Jacob Morf to come to Wildisbuch to witness a great miracle. Jacob came there with Heinrich, but was not told of the circumstances of the crucifixion till he reached the house. When he heard what had happened, he was frightened almost out of his few wits, and when taken upstairs to see the bodies, he fainted away. Nothing—no representations—would induce him to remain for the miraculous resurrection, and he hastened back to Illnau, where he took to his bed. In his alarm and horror he sent for the pastor, and told him what he had seen.

But the rest of the holy community remained steadfast in their faith. On the night of Sunday, before Monday morning broke, Ursula Kündig and the servant man Heinrich went upstairs with pincers and drew out the nails that transfixed Margaret. At the subsequent trial, when asked their reason for so doing, they said that they supposed this would facilitate Margaret's resurrection. *Sanctus furor* had made way for *sancta simplicitas*.

The night of Monday was spent in prayer and Scripture reading in the upper chamber, and eager expectation of the promised miracle, which obstinately refused to take place. The catastrophe could no longer be concealed. Something had to be done. On Tuesday, old John Peter pulled on his jacket and walked to Trüllikon to inform the pastor that his daughter Elizabeth had



died on the Saturday at 10 A. M. and his daughter Margaret at noon of the same day.

We need say little more. On December 3, 1823, the trial of all incriminated in this frightful tragedy took place at Zürich, and sentence was pronounced on the following day. Ursula Kündig was sentenced to sixteen years' imprisonment, Conrad Moser and John Peter to eight years, Susanna Peter and John Moser to six years, Heinrich Ernst to four years, Jacob Morf to three, Margaret Jäggli to two years, Barbara Baumann and Casper Peter to one year, and Magdalena Moser to six months with hard labor. It was ordered that the house at Wildisbuch be levelled with the dust, the plough drawn over the foundation, and that no house should again be erected on the spot.

Before the destruction, however, a pilgrimage of Pietists and believers in Margaret Peter had visited the scene of her death, and many had been the exclamations of admiration at her conduct. "Oh, that it had been I who had died!" "Oh, how many souls must she have delivered!" and the like. *Magna est stultitia et praevalebit.*

Barbara, the eldest, professed to the prison chaplain in Zürich, in 1823, "I am satisfied that God worked in mighty power and grace through Margaret, up to the hour of her death." The father himself declared after the ruin of the family, and the death of his two daughters, "I am assured that my youngest daughter was set apart by God for some extraordinary purpose."

The facts thus far related are condensed from the narrative of the Rev. S. Baring Gould.<sup>2</sup> I have followed his language closely.

#### A PSYCHOLOGICAL INTERPRETATION

There are two main points for consideration in a review of the psychic factors of this tragedy. First, how far are the religious phenomena presented capable of explanation and interpretation in terms of sexual psychology; and, second, how far does such explanation lend support to the theory of the erotogenesis of all religion.

<sup>2</sup> "Freaks of Fanaticism," pp. 1-38. Gould followed "Die Gekreuzigte von Wildisbuch" von J. Scherr, 2d Edit. St. Gall. 1867. Scherr made personal investigations and took notes from records of the trial as published in Zurich Archives, Vol. 166, Folio, 104-4.

Margaret Peter's religious manifestations were practically the only distinguishing mark of her otherwise commonplace character. With the mystical predispositions of her family, the fact that she was born on Christmas day appeared of peculiar moment as did also her ability to read the Bible at the age of six, and in this way the normal childish craving for attention became intermingled with a sense of religious import, food for her vanity was at the same time stimulus to her superstition, until her adolescent intelligence became wholly incapable of distinguishing them. She and her religion thus easily became one and inseparable, and the identification of herself with the object of her religious adoration was an almost inevitable step.

Whatever its physical basis, Margaret Peter's religion answered a subjective need and derived its evidence, at first largely and at last exclusively, from subjective sources. Her alternate depressions and exaltations, with the conviction of "sinfulness," are well-known sexual manifestations of adolescence. The inward urge to action, to self-expression, found welcome interpretation and opportunity in the pietists' preaching and prophesying, their exercises stimulated her and the growing intensity of a diffused passion readily explained itself as God revealing himself increasingly to her and within her.

The craving and the satisfaction were both within the ego, that is she was in the highest degree religious in character and with an intensity which brooked no opposition. Similar conditions were working toward the same end with others of the group. This is shown by the bad treatment given the "worldly" Mother Moser and to Conrad Moser, and by the bastard child of Casper Peter, Margaret Peter's own adulterous love affair with Jacob Morf, the "immorality" and psycholepsy of Margaret Jäggli, with the remorse, conviction of sin and consequent revival of religious enthusiasm. Considered as a whole, these incidents suggest that, having brought the leaders to grief, an unusually intense adolescent sensualism and its later suppression with the accompanying and unbearable idea which needed concealment, furnished the emotional dynamics, while the religious atmosphere of the time suggested the interpretation of its psychologic imperative as the will of God. So sexual enthusiasm may have become religious zeal. But did it?

To arrive at any clear decision, it is necessary to follow the development of this enthusiasm to its more intensive manifestations, where we may find in plain relief what in the beginning was but half revealed.

Saint Margaret evidently felt herself as driftwood in the current of a higher power which was irresistibly carrying her on to some unknown destiny. This is accentuated by the confidence of those who were attracted to her that she would cure the epileptic, atone for the adulterer, give spiritual consolation to those who were overwhelmed with the consciousness of their "sinfulness." The lust for power grown morbid to egomania found another source of strength in the pilgrimages made by the followers of Julianne von Krüdner, another of the mystics worthy of psychoanalysis. A consciousness of the extraordinary character of her impulses made Margaret Peter ascribe them to supernatural or divine sources, and induced fear of the incapacity of her followers to understand them and doubt of their capacity to remain true. This is the obvious explanation of the frequently expressed anxiety about an impending trial of faith in which the little group might not stand the test of righteousness.

It is interesting to note that those who uniformly and most exemplarily stood such tests were those who are most open to suspicion of abnormal sensualism, as the psycholeptic Jäggli, the unhappily married and visionary cobbler of Illnau, Sister Elizabeth and Ursula Kündig, maiden ladies and leaders of the group. It is also negatively significant that the old man Peter remained a passive observer of events so long as they appealed through their mysticism to his ignorance, but when the higher flights of ecstatic violence were enacted he withdrew and quietly went to making vine-stakes. Evidently his passions had been too much dulled by age for the appreciation of such "spiritual" exercises.

Those in whose lives sex is a negligible matter find little need to symbolize their internal struggles. Where sex torments are intense and the suppression of normal sex functioning necessary, it inevitably manifests itself symbolically and the character of the symbol is determined to a great extent by the nature of the forbidden passion or its associational relations as present in the consciousness of the subject. We can thus discover much of the character of what is suppressed by the nature of its symbolic representation.



Therefore when the desire for expression and repression of sex-passion are void of a clear and permanent preponderance in favor of one or the other course, the conflict of internal forces finds symbolic expression as conflict. Egotism suggests that that course which has the approval of those whose approval is most esteemed shall be declared to be the natural character of the individual. Vanity induces a splitting of the conflict-concept so that the impulse which tends to insure discredit to its victim can be cast out—objectivized. Having thus constructed a dualistic philosophy, the discredited tendency is usually personified as Satan. The approved tendency is ascribed to God and self, often conceived as in some manner identical.

As the warring impulses grow in intensity and the individual feels himself violently and suddenly impelled toward conflicting courses of conduct, the subject is bewildered and unbalanced. A lost sense of proportion and the consciousness of an all-consuming, all-engrossing conflict of passion suggests the concentration in one person of the conflicts and passions of many. Hence a self-importance commensurate with the passional intensity and egomania evolving from sexual prowess—nymphomania and egomania interdependent and perhaps differing only in their word symbols.

The apotheosis of self may now be superseded by the idea of self as the embodiment of an army—the hosts of heaven. The opposing Satanic hallucination also grows in importance until it becomes that of an army of imps seeking to overthrow the army of righteousness personified in self. This is the road that Margaret Peter travelled. The word-pictures by which she gave figurative expression to her subjective passional conflicts soon attained, through their suggestive influence, the importance of visual hallucinations. Since "Satan" was too abstract a concept for ready visualization, it became concretized in that most conspicuous impersonation of force and murder, Napoleon.

Once having become visualized as a man, it was easy to imagine Satan as invading the domicile of the elect and even entering into their bodies. The figurative description of contrary internal impulses as personal conflicts for mastery, suggests the entrance upon a real battle and in the case under investigation where the stage of corresponding hallucination had been reached, it was natural that the hallucination should be objectivized and

thus readily induce an actual assault upon the "possessed" person with the view to overcoming "Satan" within. The killing of Elizabeth was thus a natural evolution of sexual hyperestheticism and of the auto-suggestion of religious linguistic symbolism adopted through misinterpretation and the "spiritualization" of lust.

To the psychiatrist, the facts presented in the religious blood-lust manifested in the killing of Elizabeth and the crucifixion of Margaret, at once suggest sadism and masochism, yet the psychic mechanism by which the final tragedy was reached may repay a detailed study. As a reaction from the consequences brought about by her sensual indulgence and pregnancy, Margaret Peter probably endeavored to live continently thereafter, and the first effect of this suppression would be an oversensitized sensualism with probable capacity for psychic auto-erotism. The contemplation of divine love, religious exhortation and prayer to secure such love, may become the efficient means to the enjoyment of psycho-sexual orgasm. According to a natural law the effect of stimulants is in inverse ratio to their frequency or duration. As applied to the facts under consideration, this means that a growing intensity of stimulation became the prerequisite of climactic satisfaction. In the present case the cause of this progressive intensification of the religious furor must be sought in some fundamental craving to which it responds, which seems to show that the last foregoing theories furnish the true explanation for the phenomena under investigation.

As the frequency and intensity of the stimulation progressed the final reaction of the orgasm would grow more violent, and this growing intensity of the convulsive, muscular reactions to an adequate sexual stimulus brings to the surface of consciousness the craving for some object against which that exertion may be directed, to enhance the joy of a consciousness of power. I believe this explains the craving which at first induced the breaking of furniture and walls. When the orgasm was reached the tension was relieved and quiet was restored. After the hallucinatory investiture of Elizabeth with a demon, the former subjective struggle which had been symbolized as warfare naturally found a practical realization in an attack upon her for the avowed purpose of destroying the Satan within her.

The real dynamics of this performance, however, was a sub-

conscious or half conscious craving for the erotic stimulation. The very source of the transcendental seemings—of the religion—was the abnormally intense sex-impulse. But the usual erotic tendency to cruelty was still undifferentiated as between sadism and masochism. When the saintess had exhausted her capacity for climactic reactions to a customary kind of stimulus, a still more intensive excitation became necessary to induce a tardy orgasm. The religious interpretation by an association of ideas of the subconscious craving determined the nature of the attempt toward gratification through crucifixion and finally the self-imposed slaughter.

It is perfectly clear in this case that the very essence of religion as manifested in the "supernatural" powers was merely supernormal sensualism, psycho-erotism spiritualized, transcendentalized, apotheosized. Thus far the extraordinary phenomena presented are explainable by the working hypothesis elsewhere established, and the analysis made of this case shows in it substantial support of the working hypothesis.

At some future time with more complete data, derived from numerous cases of religious fanaticisms and enthusiasms, it will appear that this is but one of many similar instances requiring the same erotogenetic interpretation.

By a series of successive inductions made from such studies, finally including sufficiently vast materials to warrant a comprehensive rational generalization, we may acquire a demonstration of my working hypothesis, elsewhere developed and which is as follows:

All religion, at all times, and everywhere, in its differential essence, is only a sex ecstasy, seldom recognized to be that, and therefore, easily and actually misinterpreted as a mysterious and "transcendental," or super-physical, indiscriminating witness to the inerrancy of all those varying and often contradictory doctrines and ceremonies believed to be of super-physical value in the promotion of present material, ecstatic or post-mortem well-being and which, in the mind of the believing person, happen to be associated with and conceived as attached to the feeling-testimony. Thus it is that all variety of religionists know because they feel and are firmly convinced in proportion as they are strongly agitated.



# THE PRAGMATIC ADVANTAGE OF FREUDO-ANALYSIS<sup>1</sup>

(A CRITICISM)

BY PROF. KNIGHT DUNLAP

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Dr. Morton Prince's report of the analysis and cure of a remarkable case of phobia for the sound of bells<sup>2</sup> must, it seems to me, impress the reader with two things: on the one hand, with the skill with which the analysis and cure were completed; and on the other hand, with the difficulty in handling such cases. In other words, one is led to conjecture what the patient's chances would have been had she fallen into less competent hands. Although the real expert goes quickly and certainly to the foundations of such cases, such experts are after all rare, and if these cases require the discovery of the actual troublesome association, a sadly large proportion will never be cured.

The apparent success of those practitioners who proceed in such cases on the basis of the conventionalized sexual interpretation of Freud's school suggests the possibility that cures may be effected without the discovery of the real causes of the disturbance. It is quite probable that the sole need in such a case is to break off the association (or neural habit). Certainly, complete psycho-analysis can supply means for breaking it off: but it may also be possible to disrupt it in another way. If you are confronting a strongly entrenched enemy, you may perhaps dis-

<sup>1</sup> Presented before the twenty-second annual meeting of the American Psychological Association, New Haven, December 31, 1913.

<sup>2</sup> *Journal of Abnormal Psychology*, 1913, VIII, 228-242. The case is that of a woman suffering apparently from a phobia of steeples or bell towers. While seeing the easy Freudian interpretation in which the steeple becomes a phallic symbol, Dr. Prince was not satisfied with the easiest solution, and on more searching analysis, discovered that the phobia was only indirectly towards steeples, but directly towards church bells, and resulted from definitely identified circumstances connected with the death of the patient's mother. This analysis occupied but a single sitting, and the patient's cure also required but a single sitting.

cover the exact strength and location of his fortifications, and drive him from them: but it may be easier to cut off his supplies and starve him out. This latter course is apparently followed by Freud's disciples.

The obvious Freudo-analytical interpretation in the case of Prince's patient would be that she had an infantile complex referring to her father. Announcing this to such a patient could, of course, do no good, as she would strenuously resist the supposition; but by a clever (and *lengthy*) course of treatment the patient may be led to make the discovery herself (!), and make it so gradually and circumstantially that she offers no resistance to its full acceptance. By prolonged treatment the idea of the complex is brought to a vigorous stage of development, and association between it and the disturbing emotional reaction firmly established. This new association gradually saps the life of the older associative connection of the reaction, and permits the final abolition of the old association. Then, if the physician is able to destroy the new association which he has substituted, the patient is cured, and cured without the discovery of the original association. The procedure reminds us strongly of the methods of the doctor who was 'strong on fits' and relieved sufferers from other complaints by throwing them into fits and then curing the fits: but nevertheless it may be pragmatically justifiable.

The main conditions for successful Freudo-analysis are therefore the following:

1. The new association must be developed through a relatively long period of time, allowing it to become strong and to undermine the original association. As a matter of fact, successful Freudian treatment is an affair of months.

2. The new associates must not be forced upon the patient, but she must be slowly and skillfully led to discover (!) them for herself.

3. The associates selected must be such as will be suggested by almost any content of the patient's consciousness, thus making their discovery easy; and must be such as have a strong natural interest, facilitating the acceptance of the idea and the rapid growth of the association. Sexual matters fill these requirements admirably. Through the organic reverberation and the perseveration of sexual ideas, associations with any other contents are

quickly established. There is absolutely nothing in the universe which may not readily be made into a sexual symbol. As an illustration of this I have taken fragments of literature at random and translated them mechanically into lurid material which would not be transmissible through the mails, but which is characteristically Freudian. Nursery rhymes are easy subjects for this type of pornography. Of course I cannot illustrate before this audience. Furthermore, all natural and artificial objects can be turned into Freudian symbols. We may explain, by Freudian principles, why trees have their roots in the ground; why we write with pens; why we put a quart of wine into a bottle instead of hanging it on a hook like a ham; and so on.

In short, sexual associations are most admirably adapted for the purposes of Freud-analysis. With such means at the command of analysts of skill and patience, it is in many cases quite unnecessary to determine the cause of the psychoneurotic condition in order to cure it. It is only from this pragmatic viewpoint that Freud-analysis can be supposed to have an advantage over the more scientific methods followed by Prince.

Lest my method of presentation in the foregoing may leave some doubts as to the seriousness of my purpose I will now attempt to restate my point in an unequivocal form.

Freudo-analytic treatment may in some cases hit upon and uproot the actual associations from which the patient's disorders have grown; but in most cases the mechanism of successful treatment will be merely the substitution of a new pathological complex for the undiscovered original complex. The bare raising of this point should make it clear that cures resulting from Freudian treatment have no value as evidence in support of the Freudian dogmas.

The advisability of substitutional therapy, except as a last resort, is questionable. It may be that such treatment will be successful in a proportion of cases sufficiently large to justify it. On the other hand there are two possibilities: first, that the complex created by the Freud-analyst may not supplant the original complex; and second, that the analyst may not be able to destroy the complex he has created. It is this latter possibility which is fraught with danger.



In conclusion I wish to say that I would appreciate criticism however severe, if it really has bearing on the question at issue; but I cannot take seriously the criticism which is too frequently made by Freudians: "You do not *know*: we who have studied, *we* know, and we cannot argue with you because you do not know." I may add that I have already been told that this paper is an interesting revelation of my own complexes.

# THE THEORY OF PSYCHOANALYSIS

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(Continued from page 40)

From the genetic standpoint it is otherwise. It regards the multiplicity of instincts as issuing out of relative unity, the primitive libido. It recognizes that definite quantities of the primitive libido are split off, associated with the recently created functions, and finally merged in them. From this standpoint we can say, without any difficulty, that patients with dementia præcox withdraw their "libido" from the external world and in consequence suffer a loss of reality, which is compensated by an increase of the phantasy-building activities.

We must now fit the new conception of libido into that theory of sexuality in childhood which is of such great importance in the theory of neurosis. Generally speaking, we first find the libido as the energy of vital activities acting in the zone of the function of nutrition. Through the rhythmical movements in the act of sucking, nourishment is taken with all signs of satisfaction. As the individual grows and his organs develop, the libido creates new ways of desire, new activities and satisfactions. Now the original model—rhythmic activity, creating pleasure and satisfaction—must be transferred to other functions which have their final goal in sexuality.

This transition is not made suddenly at puberty, but it takes place gradually throughout the course of the greater part of childhood. The libido can only very slowly and with great difficulty detach itself from the characteristics of the function of nutrition, in order to pass over into the characteristics of sexual function. As far as I can see, we have two epochs during this transition, the epoch of *sucking* and the epoch of the *displaced rhythmic activity*. Considered solely from the point of view of its mode of action, sucking clings entirely to the domain of the function of nutrition, but it presents also a far wider aspect, it is no mere function of nutrition, it is a rhythmical activity, with its goal in a

pleasure and satisfaction of its own, distinct from the obtaining of nourishment. The hand comes into play as an accessory organ. In the epoch of the displaced rhythmical activity it stands out still more as an accessory organ, when the oral zone ceases to give pleasure, which must now be obtained in other directions. The possibilities are many. As a rule the other openings of the body become the first objects of interest of the libido; then follow the skin in general and certain places of predilection upon it.

The actions carried out at these places generally take the form of rubbing, piercing, tugging, etc., accompanied by a certain rhythm, and serve to produce pleasure. After a halt of greater or less duration at these stations, the libido proceeds until it arrives at the sexual zone, where it may next provoke the first onanistic attempts. During its "march," the libido carries over not a little from the function of nutrition into the sexual zone; this readily explains the numerous close associations between the function of nutrition and the sexual function.

This "march" of the libido takes place at the time of the pre-sexual stage, which is characterized by the fact that the libido gradually relinquishes the special character of the instinct of nutrition, and by degrees acquires the character of the sexual instinct. At this stage we cannot yet speak of a true sexual libido. Therefore we are obliged to qualify the polymorphous perverse sexuality of early infancy differently. The polymorphism of the tendencies of the libido at this time is to be explained as the gradual movement of the libido away from the sphere of the function of nutrition towards the sexual function.

*The Infantile "Perversity."*—Thus rightly vanishes the term "perverse"—so strongly contested by our opponents—for it provokes a false idea.

When a chemical body breaks up into its elements, these elements are the products of its disintegration, but it is not permissible on that account to describe elements as entirely products of disintegration. Perversities are disorders of fully-developed sexuality, but are never precursors of sexuality, although there is undoubtedly an analogy between the precursors and the products of disintegration. The childish rudiments, no longer to be conceived as perverse, but to be regarded as stages of development, change gradually into normal sexuality, as the normal sexuality develops.

The more smoothly the libido withdraws from its provisional



positions, the more completely and the more quickly does the formation of normal sexuality take place. It is proper to the conception of normal sexuality that all those early infantile inclinations which are not yet sexual should be given up. The less this is the case, the more is sexuality threatened with perverse development. The expression "perverse" is here used in its right place. The fundamental condition of a perversity is an infantile, imperfectly developed state of sexuality.

#### CHAPTER IV

##### THE ETIOLOGICAL SIGNIFICANCE OF THE INFANTILE SEXUALITY

Now that we have decided what is to be understood as infantile sexuality, we can follow up the discussion of the theory of the neuroses, which we began in the first lecture and then dropped. We followed the theory of the neuroses up to the point where we ran against Freud's statement, that the tendency which brings a traumatic event to a pathological activity, is a sexual one. From our foregoing considerations we understand what is meant by a sexual tendency. It is a standing still, a retardation in that process whereby the libido frees itself from the manifestations of the pre-sexual stage.

First of all, we must regard this disturbance as a *fixation*. The libido, in its transition from the function of nutrition to the sexual function, lingers unduly at certain stages. A disharmony is created, since provisional and, as it were, worn-out activities, persist at a period when they should have been overcome. This formula is applicable to all those infantile characteristics so prevalent among neurotic people that no attentive observer can have overlooked them. In dementia præcox it is so obtrusive that a symptom complex, hebephrenia, derives its name therefrom.

The matter is not ended, however, by saying that the libido lingers in the preliminary stages, for while the libido thus lingers, time does not stand still, and the development of the individual is always proceeding apace. The physical maturation increases the contrast and the disharmony between the persistent infantile manifestations, and the demands of the later age, with its changed conditions of life. In this way the foundation is laid for the dissociation of the personality, and thereby to that conflict which is

the real basis of the neuroses. The more the libido is in arrears in practice, the more intense will be the conflict. The traumatic or pathogenic moment is the one which serves best to make this conflict manifest. As Freud showed in his earlier works, one can easily imagine a neurosis arising in this way.

This conception fitted in rather well with the views of Janet, who ascribed neurosis to a certain defect. From this point of view the neurosis could be regarded as a product of retardation in the development of affectivity; and I can easily imagine that this conception must seem selfevident to every one who is inclined to derive the neuroses more or less directly from heredity or congenital degeneration.

#### THE INFANTILE SEXUAL ETIOLOGY CRITICIZED

Unfortunately the reality is much more complicated. Let me facilitate an insight into these complications by an example of a case of hysteria. It will, I hope, enable me to demonstrate the characteristic complication, so important for the theory of neurosis. You will probably remember the case of the young lady with hysteria, whom I mentioned at the beginning of my lectures. We noticed the remarkable fact that this patient was unaffected by situations which one might have expected to make a profound impression and yet showed an unexpected extreme pathological reaction to a quite everyday event. We took this occasion to express our doubt as to the etiological significance of the shock, and to investigate the so-called predisposition which rendered the trauma effective. The result of that investigation led us to what has just been mentioned, that it is by no means improbable that the origin of the neurosis is due to a retardation of the affective development.

You will now ask me what is to be understood by the retardation of the affectivity of this hysteric. The patient lives in a world of phantasy, which can only be regarded as infantile. It is unnecessary to give a description of these phantasies, for you, as neurologists or psychiatrists, have the opportunity daily to listen to the childish prejudices, illusions and emotional pretensions to which neurotic people give way. The disinclination to face stern reality is the distinguishing trait of these phantasies—some lack of earnestness, some trifling, which sometimes hides real diffi-

culties in a light-hearted manner, at others exaggerates trifles into great troubles. We recognize at once that inadequate psychic attitude towards reality which characterizes the child, its wavering opinions and its deficient orientation in matters of the external world. With such an infantile mental disposition all kinds of desires, phantasies and illusions can grow luxuriantly, and this we have to regard as the critical causation. Through such phantasies people slip into an unreal attitude, preeminently ill-adapted to the world, which is bound some day to lead to a catastrophe. When we trace back the infantile phantasy of the patient to her earliest childhood we find, it is true, many distinct, outstanding scenes which might well serve to provide fresh food for this or that variation in phantasy, but it would be vain to search for the so-called traumatic motive, whence something abnormal might have sprung, such an abnormal activity, let us say, as day-dreaming itself. There are certainly to be found traumatic scenes, although not in earliest childhood; the few scenes of earliest childhood which were remembered seem not to be traumatic, being rather accidental events, which passed by without leaving any effect on her phantasy worth mentioning. The earliest phantasies arose out of all sorts of vague and only partly understood impressions received from her parents. Many peculiar feelings centered around her father, vacillating between anxiety, horror, aversion, disgust, love and enthusiasm. The case was like so many other cases of hysteria, where no traumatic etiology can be found, but which grows from the roots of a peculiar and premature activity of phantasy which maintains permanently the character of infantilism.

You will object that in this case the scene with the shying horses represents the trauma. It is clearly the model of that night-scene which happened nineteen years later, where the patient was incapable of avoiding the trotting horses. That she wanted to plunge into the river has an analogy in the model scene, where the horses and carriage fell into the river.

Since the latter traumatic moment she suffered from hysterical fits. As I tried to show you, we do not find any trace of this apparent etiology developed in the course of her phantasy life. It seems as if the danger of losing her life, that first time, when the horses shied, passed without leaving any emotional trace.



None of the events that occurred in the following years showed any trace of that fright. In parenthesis let me add, that perhaps it never happened at all. It may have even been a mere phantasy, for I have only the assertions of the patient. All of a sudden, some eighteen years later, this event becomes of importance and is, so to say, reproduced and carried out in all its details. This assumption is extremely unlikely, and becomes still more inconceivable if we also bear in mind that the story of the shying horses may not even be true. Be that as it may, it is and remains almost unthinkable that an affect should remain buried for years and then suddenly explode. In other cases there is exactly the same state of affairs. I know, for instance, of a case in which the shock of an earthquake, long recovered from, suddenly came back as a lively fear of earthquakes, although this reminiscence could not be explained by the external circumstances.

#### THE TRAUMATIC THEORY—A FALSE WAY

It is a very suspicious circumstance that these patients frequently show a pronounced tendency to account for their illnesses by some long-past event, ingeniously withdrawing the attention of the physician from the present moment towards some false track in the past. This false track was the first one pursued by the psychoanalytic theory. To this false hypothesis we owe an insight into the understanding of the neurotic symptoms never before reached, an insight we should not have gained if the investigation had not chosen this path, really guided thither, however, by the misleading tendencies of the patient.

I think that only a man who regards world-happenings as a chain of more or less fortuitous contingencies, and therefore believes that the guiding hand of the reason-endowed pedagogue is permanently wanted, can ever imagine that this path, upon which the patient leads the physician, has been a wrong one, from which one ought to have warned men off with a sign-board. Besides the deeper insight into psychological determination, we owe to the so-called error the discovery of questions of immeasurable importance regarding the basis of psychic processes. It is for us to rejoice and be thankful that Freud had the courage to let himself be guided along this path. Not thus is the progress of science hindered, but rather through blind adherence to a provisional

formulation, through the typical conservatism of authority, the vanity of learned men, their fear of making mistakes. This lack of the martyr's courage is far more injurious to the credit and greatness of scientific knowledge than an honest error.

#### RETARDATION OF THE EMOTIONAL DEVELOPMENT

But let us return to our own case. The following question arises: If the old trauma is not of etiological significance, then the cause of the manifest neurosis is probably to be found in the retardation of the emotional development. We must therefore disregard the patient's assertion that her hysterical crises date from the fright from the shying horses, although this fright was in fact the beginning of her evident illness. This event only seems to be important, although it is not so in reality. This same formula is valid for all the so-called shocks. They only seem to be important because they are the starting-point of the external expression of an abnormal condition. As explained in detail, this abnormal condition is an anachronistic continuation of an infantile stage of libido-development. These patients still retain forms of the libido which they ought to have renounced long ago. It is impossible to give a list, as it were, of these forms, for they are of an extraordinary variety. The most common, which is scarcely ever absent, is the excessive activity of phantasies, characterized by an unconcerned exaggeration of subjective wishes. This exaggerated activity is always a sign of want of proper employment of the libido. The libido sticks fast to its use in phantasies, instead of being employed in a more rigorous adaptation to the real conditions of life.

#### INTROVERSION

This state is called the state of *introversion*, the libido is used for the psychical inner world instead of being applied to the external world. A regular attendant symptom of this retardation in the emotional development is the so-called parent-complex. If the libido is not used entirely for the adaptation to reality, it is always more or less introverted. The material content of the psychic world is composed of reminiscences, giving it a vividness of activity which in reality long since ceased to pertain thereto.

The consequence is, that these patients still live more or less in a world which in truth belongs to the past. They fight with difficulties which once played a part in their life, but which ought to have been obliterated long ago. They still grieve over matters, or rather they are still concerned with matters, which should have long ago lost their importance for them. They divert themselves, or distress themselves, with images which were once normally of importance for them but are of no significance at their later age.

#### THE COMPLEX OF THE PARENTS

Amongst those influences most important during childhood, the personalities of the parents play the most potent part. Even if the parents have long been dead, and might and should have lost all real importance, since the life-conditions of the patients are perhaps totally changed, yet these parents are still somehow present and as important as if they were still alive. Love and admiration, resistance, repugnance, hate and revolt, still cling to their figures, transfigured by affection and very often bearing little resemblance to the past reality. It was this fact which forced me to talk no longer of father and mother directly, but to employ instead the term "image" (*imago*) of mother or of father for these phantasies no longer deal with the real father and the real mother, but with the subjective, and very often completely altered creations of the imagination which prolong an existence only in the patient's mind.

The complex of the parents' images, that is to say, the sum of ideas connected with the parents, provides an important field of employment for the introverted libido. I must mention in passing that the complex has in itself but a shadowy existence in so far as it is not invested with libido. Following the usage that we arrived at in the "Diagnostische Associationsstudien," the word "complex" is used for a system of ideas already invested with, and actuated by, libido. This system exists as a mere possibility, ready for application, if not invested with libido either temporarily or permanently.

*The "Nucleus"-Complex.*—At the time when the psychoanalytic theory was still under the dominance of the trauma conception and, in conformity with that view, inclined to look for the *causa efficiens* of the neurosis in the past, the parent-complex



seemed to us to be the so-called root-complex—to employ Freud's term—or nucleus-complex (“Kerncomplex”).

The part which the parents played seemed to be so highly determining that we were inclined to attribute to them all later complications in the life of the patient. Some years ago I discussed this view in my article<sup>7</sup> “Die Bedeutung des Vaters für das Schicksal des Einzelnen.” (The importance of the father for the fate of the individual.)

Here also we were guided by the patient's tendency to revert to the past, in accordance with the direction of his introverted libido. Now indeed it was no longer the external, accidental event which caused the pathogenic effect, but a psychological effect which seemed to arise out of the individual's difficulties in adapting himself to the conditions of his familiar surroundings. It was especially the disharmony between the parents on the one hand and between the child and the parents on the other which seemed favorable for creating currents in the child little compatible with his individual course of life. In the article just alluded to I have described some instances, taken from a wealth of material, which show these characteristics very distinctly. The influence of the parents does not come to an end, alas, with their neurotic descendants' blame of the family circumstances, or their false education, as the basis of their illness, but it extends even to certain actual events in the life and actions of the patient, where such a determining influence could not have been expected. The lively imitativeness which we find in savages as well as in children can produce in certain rather sensitive children a peculiar inner and unconscious identification with the parents; that is to say, such a similar mental attitude that effects in real life are sometimes produced which, even in detail, resemble the personal experiences of the parents. For the empirical material here, I must refer you to the literature. I should like to remind you that one of my pupils, Dr. Emma Fürst, produced valuable experimental proofs for the solution of this problem, to which I referred in my lecture at Clark University.<sup>8</sup> In applying association experiments to whole families, Dr. Fürst established

<sup>7</sup> *Jahrbuch für Psychoanalytische und Psychopathologische Forschungen*, Bd. I.

<sup>8</sup> *Am. Jour. Psychol.*, April, 1910.

the great resemblance of reaction-type among all the members of one family.

These experiments show that there very often exists an unconscious parallelism of association between parents and children, to be explained as an intense imitation or identification.

The results of these investigations show far-reaching psychological tendencies in parallel directions, which readily explain at times the astonishing conformity in their destinies. Our destinies are as a rule the result of our psychological tendencies. These facts allow us to understand why, not only the patient, but even the theory which has been built on such investigations, expresses the view, that the neurosis is the result of the characteristic influence of the parents upon their children. This view, moreover, is supported by the experiences which lie at the basis of pedagogy: namely the assumption of the plasticity of the child's mind, which is freely compared with soft wax.

We know that the first impressions of childhood accompany us throughout life, and that certain educational influences may restrain people undisturbed all their lives within certain limits. It is no miracle, indeed it is rather a frequent experience, that under these circumstances a conflict has to break out between the personality which is formed by the educational and other influences of the infantile milieu and that one which can be described as the real individual line of life. With this conflict all people must meet, who are called upon to live an independent and productive life.

Owing to the enormous influence of childhood on the later development of character, you can perfectly understand why we are inclined to ascribe the cause of a neurosis directly to the influences of the infantile environment. I have to confess that I have known cases in which any other explanation seemed to be less reasonable. There are indeed parents whose own contradictory neurotic behavior causes them to treat their children in such an unreasonable way that the latter's deterioration and illness would seem to be unavoidable. Hence it is almost a rule among nerve-specialists to remove neurotic children, whenever possible, from the dangerous family atmosphere, and to send them among more healthy influences, where, without any medical treatment, they thrive much better than at home. There are

many neurotic patients who were clearly neurotic as children, and who have never been free from illness. For such cases, the conception which has been sketched holds generally good.

This knowledge, which seems to be provisionally definitive, has been extended by the studies of Freud and the psychoanalytic school. The relations between the patients and their parents have been studied in detail in as much as these relations were regarded as of etiological significance.

#### INFANTILE MENTAL ATTITUDE

It was soon noticed that such patients lived still partly or wholly in their childhood-world, although quite unconscious themselves of this fact. It is a difficult task for psychoanalysis so exactly to investigate the psychological mode of adaptation of the patients as to be capable of putting its finger on the infantile misunderstanding. We find among neurotics many who have been spoiled as children. These cases give the best and clearest example of the infantilism of their psychological mode of adaptation. They start out in life expecting the same friendly reception, tenderness and easy success, obtained with no trouble, to which they have been accustomed by their parents in their youth. Even very intelligent patients are not capable of seeing at once that they owe the complications of their life and their neurosis to the trail of their infantile emotional attitude. The small world of the child, the familiar surroundings—these form the model of the big world. The more intensely the family has stamped the child, the more will it be inclined, as an adult, instinctively to see again in the great world its former small world. Of course this must not be taken as a conscious intellectual process. On the contrary, the patient feels and sees the difference between now and then, and tries to adapt himself as well as he can. Perhaps he will even believe himself perfectly adapted, for he grasps the situation intellectually, but that does not prevent the emotional from being far behind the intellectual standpoint.

#### UNCONSCIOUS PHANTASY

It is unnecessary to trouble you with instances of this phenomenon. It is an every-day experience that our emotions are



never at the level of our reasoning. It is exactly the same with such a patient, only with greater intensity. He may perhaps believe that, save for his neurosis, he is a normal person, and hence adapted to the conditions of life. He does not suspect that he has not relinquished certain childish pretensions, that he still carries with him, in the background, expectations and illusions which he has never rendered conscious to himself. He cultivates all sorts of favorite phantasies, which seldom become conscious, or at any rate, not very often, so that he himself does not know that he has them. They very often exist only as emotional expectations, hopes, prejudices, etc. We call these phantasies, unconscious phantasies. Sometimes they dip into the peripheral consciousness as quite fugitive thoughts, which disappear again a moment later, so that the patient is unable to say whether he had such phantasies or not. It is only during the psychoanalytic treatment that most patients learn to observe and retain these fleeting thoughts. Although most of the phantasies, once at least, have been conscious in the form of fleeting thoughts and only afterwards became unconscious, we have no right to call them on that account "conscious," as they are practically most of the time unconscious. It is therefore right to designate them "unconscious phantasies." Of course there are also infantile phantasies, which are perfectly conscious and which can be reproduced at any time.

## CHAPTER V

### THE UNCONSCIOUS

The sphere of the unconscious infantile phantasies has become the real object of psychoanalytic investigation. As we have previously pointed out, this domain seems to retain the key to the etiology of neurosis. In contradistinction with the trauma theory, we are forced by the reasons already adduced to seek in the family history for the basis of our present psychoanalytic attitude. Those phantasy-systems which patients exhibit on mere questioning are for the most part composed and elaborated like a novel or a drama. Although they are greatly elaborated, they are relatively of little value for the investigation of the unconscious. Just because they are conscious, they have already de-

ferred over-much to the claims of etiquette and social morality. Hence they have been purged of all personally painful and ugly details, and are presentable to society, revealing very little. The valuable, and much more important phantasies are not conscious in the sense already defined, but are to be discovered through the technique of psychoanalysis.

Without wishing to enter fully into the question of technique, I must here meet an objection that is constantly heard. It is that the so-called unconscious phantasies are only suggested to the patient and only exist in the minds of psychoanalysts. This objection belongs to that common class which ascribes to them the crude mistakes of beginners. I think only those without psychological experience and without historical psychological knowledge are capable of making such criticisms. With a mere glimmering of mythological knowledge, one cannot fail to notice the striking parallels between the unconscious phantasies discovered by the psychoanalytic school and mythological images. The objection that our knowledge of mythology has been suggested to the patient is groundless, for the psychoanalytic school first discovered the unconscious phantasies, and only then became acquainted with mythology. Mythology itself is obviously something outside the path of the medical man. In so far as these phantasies are unconscious, the patient of course knows nothing about their existence, and it would be absurd to make direct inquiries about them. Nevertheless it is often said, both by patients and by so-called normal persons: "But if I had such phantasies, surely I would know something about them." But what is unconscious is, in fact, something which one does not know. The opposition too is perfectly convinced that such things as unconscious phantasies could not exist. This *a priori* judgment is scholasticism, and has no sensible grounds. We cannot possibly rest on the dogma that consciousness only is mind, when we can convince ourselves daily that our consciousness is only the stage. When the contents of our consciousness appear they are already in a highly complex form; the grouping of our thoughts from the elements supplied by our memory is almost entirely unconscious. Therefore we are obliged, whether we like it or not, to accept for the moment the conception of an unconscious psychic sphere, even if only as a mere negative, border-conception, just as Kant's "thing in

itself." As we perceive things which do not have their origin in consciousness, we are obliged to give hypothetic contents to the sphere of the non-conscious. We must suppose that the origin of certain effects lies in the unconscious, just because they are not conscious. The reproach of mysticism can scarcely be made against this conception of the unconscious. We do not pretend that we know anything positive, or can affirm anything, about the psychic condition of the unconscious. Instead, we have substituted symbols by following the way of designation and abstraction we apply in consciousness.

On the axiom: *Principia præter necessitatem non sunt multiplicanda*, this kind of ideation is the only possible one. Hence we speak about the effects of the unconscious, just as we do about the phenomena of the conscious. Many people have been shocked by Freud's statement: "The unconscious can only wish," and this is regarded as an unheard of metaphysical assertion, something like the principle of Hartman's "Philosophy of the Unconscious," which apparently administers a rebuff to the theory of cognition. This indignation only arises from the fact that the critics, unknown to themselves, evidently start from a metaphysical conception of the unconscious as being an "end per se," and naïvely project on to us their inadequate conception of the unconscious. For us, the unconscious is no entity, but a term, about whose metaphysical entity we do not permit ourselves to form any idea. Here we contrast with those psychologists, who, sitting at their desks, are as exactly informed about the localization of the mind in the brain as they are informed about the psychological correlation of the mental processes. Whence they are able to declare positively that beyond the consciousness there are but physiological processes of the cortex. Such naiveté must not be imputed to the psychoanalyst. When Freud says: "We can only wish," he describes in symbolic terms effects of which the origin is not known. From the standpoint of our conscious thinking, these effects can only be considered as analogous to wishes. The psychoanalytic school is, moreover, aware that the discussion as to whether "wishing" is a sound analogy can be re-opened at any time. Anyone who has more information is welcome. Instead, the opponents content themselves with denial of the phenomena, or if certain phenomena are



admitted, they abstain from all theoretical speculation. This last point is readily to be understood, for it is not everyone's business to think theoretically. Even the man who has succeeded in freeing himself from the dogma of the identity of the conscious self and the psyche, thus admitting the possible existence of psychic processes outside the conscious, is not justified in disputing or maintaining psychic possibilities in the unconscious. The objection is raised that the psychoanalytic school maintains certain views without sufficient grounds, as if the literature did not contain abundant, perhaps too abundant, discussion of cases, and more than enough arguments. But they seem not to be sufficient for the opponents. There must be a good deal of difference as to the meaning of the term "sufficient" in respect to the validity of the arguments. The question is: "Why does the psychoanalytic school apparently set less store on the proof of their formulae than the critics?" The reason is very simple. An engineer who has built a bridge, and has worked out its bearing capacity, wants no other proof for the success of its bearing power. But the ordinary man, who has no notion how a bridge is built, or what is the strength of the material used, will demand quite different proofs as to the bearing capacity of the bridge, for he has no confidence in the business. In the first place, it is the critics' complete ignorance of what is being done which provokes their demand. In the second place, there are the unanswerable theoretical misunderstandings: impossible for us to know them all and understand them all. Just as we find, again and again, in our patients new and astonishing misunderstandings about the ways and the aim of the psychoanalytic method, so are the critics inexhaustible in devising misunderstandings. You can see in the discussion of our conception of the unconscious what kind of false philosophical assumptions can prevent the understanding of our terminology. It is comprehensible that those who attribute to the unconscious involuntarily an absolute entity, require quite different arguments, beyond our power to give. Had we to prove immortality, we should have to collect many more important arguments, than if we had merely to demonstrate the existence of plasmodia in a malaria patient. The metaphysical expectation still disturbs the scientific way of thinking, so that problems of psychoanalysis cannot be considered in a

simple way. But I do not wish to be unjust to the critics, and I will admit that the psychoanalytic school itself very often gives rise to misunderstandings, although innocently enough. One of the principal sources of these mistakes is the confusion in the theoretical sphere. It is a pity, but we have no presentable theory. But you would understand this, if you could see, in a concrete case, with what difficulties we have to deal. In contradiction to the opinion of nearly all critics, Freud is by no means a theorist. He is an empiricist, of which fact anyone can easily convince himself, if he is willing to busy himself somewhat more deeply with Freud's works, and if he tries to go into the cases as Freud has done. Unfortunately, the critics are not willing. As we have very often heard, it is too disgusting and too repulsive, to observe cases in the same way as Freud has done. But who will learn the nature of Freud's method, if he allows himself to be hindered by repulsion and disgust? Because they neglect to apply themselves to the point of view adopted by Freud, perhaps as a necessary working hypothesis, they come to the absurd supposition that Freud is a theorist. They then readily agree that Freud's "Three Contributions to the Sexual Theory" is *a priori* invented by a merely speculative brain which afterwards suggests everything into the patient. That is putting things upside down. This gives the critics an easy task, and this is just what they want to have. They pay no attention to the observations of the psychoanalysts, conscientiously set forth in their histories of diseases, but only to the theory, and to the formulation of technique. The weak spot of psychoanalysis, however, is not found here, as psychoanalysis is only empirical. Here you find but a large and insufficiently cultivated field, in which the critics can exercise themselves to their full satisfaction. There are many uncertainties, and as many contradictions, in the sphere of this theory. We were conscious of this long before the first critic began to pay attention to our work.

## CHAPTER VI

### THE DREAM

After this digression we will return to the question of the unconscious phantasies which occupied us before. As we have

seen, nobody can dispute their existence, just as nobody can assert their existence and their qualities forthwith. The question, however, is just this: Can effects be observed in the consciousness of unconscious origin, which can be described in conscious symbolic signs or expressions? Can there be found, in the conscious, effects which correspond with this expectation? The psychoanalytic school believes it has discovered such effects. Let me mention at once the principal phenomenon, the dream. Of this it may be said that it appears in the consciousness as a complex factor unconsciously constructed out of its elements. The origin of the images in certain reminiscences of the earlier or of the later past can be proved through the associations belonging to the single images of the dream. We ask: "Where did you see this?" or "Where did you hear that?" And through the usual way of association come the reminiscences that certain parts of the dream have been consciously experienced, some the day before, some on former occasions. So far there will be general agreement, for these things are well known. In so far, the dream represents in general an incomprehensible composition of certain elements not at first conscious, which are only recognized later on by their associations. It is not that all parts of the dream are recognizable, whence its conscious character could be deduced; on the contrary, they are often, and indeed mostly, unrecognizable at first. Only subsequently does it occur to us that we have experienced in consciousness this or that part of the dream. From this standpoint alone, we might regard the dream as an effect of unconscious origin.

#### THE METHOD OF DREAM ANALYSIS

The technique for the exploration of the unconscious origin is the one I mentioned before, used before Freud by every scientific man who attempted to arrive at a psychological understanding of dreams. We try simply to remember where the parts of the dream arose. The psychoanalytic technique for the interpretation of dreams is based on this very simple principle. It is a fact that certain parts of the dream originate in daily life, that is, in events which, on account of their slighter importance, would have fallen into oblivion, and indeed were on the way to become definitely unconscious. It is these parts of the dream that are the



effect of unconscious images and representations. People have been shocked by this expression also. But we do not conceive these things so concretely, not to say crudely, as do the critics. Certainly this expression is nothing but a symbolism taken from conscious psychology—we were never in any doubt as to that. The expression is quite clear and answers very well as a symbol of an unknown psychic fact.

As we mentioned before, we can conceive the unconscious only by analogy with the conscious. We do not imagine that we understand a thing when we have discovered a beautiful and rather incomprehensible name. The principle of the psychoanalytic technique is, as you see, extraordinarily simple. The further procedure follows on in the same way. If we occupy ourselves long with a dream, a thing which, apart from psychoanalysis, naturally never happens, we are apt to find still more reminiscences to the various different parts of the dream. We are not however always successful in finding reminiscences to certain portions. We have to put aside these dreams, or parts of dreams, whether we will or no.

The collected reminiscences are called the "*dream material*." We treat this material by a universally valid scientific method. If you ever have to work up experimental material, you compare the individual units and classify them according to similarities. You proceed exactly in the same way with dream-material; you look for the common traits either of a formal or a substantial nature.

Certain extremely common prejudices must be got rid of. I have always noticed that the beginner is looking for one trait or another and tries to make his material conform to his expectation. This condition I noticed especially among those colleagues who were formerly more or less passionate opponents of psychoanalysis, their opposition being based on well-known prejudices and misunderstandings. When I had the chance of analyzing them, whereby they obtained at last a real insight into the method, the first mistake generally made in their own psychoanalytic work was that they did violence to the material by their own preconceived opinion. They gave vent to their former prejudice against psychoanalysis in their attitude towards the material, which they could not estimate objectively, but only according to their subjective phantasies.

If one would have the courage to sift dream material, one must not recoil from any parallel. The dream material generally consists of very heterogeneous associations, out of which it is sometimes very difficult to deduce the tertium comparationis. I refrain from giving detailed examples, as it is quite impossible to handle in a lecture the voluminous material of a dream. I might call your attention to Rank's<sup>9</sup> article in the *Jahrbuch*, "Ein Traum der sich selber deutet" (A dream interpreted by itself). There you will see what an extensive material must be taken into consideration for comparison.

Hence, for the interpretation of the unconscious we proceed in the same way as is universal when a conclusion is to be drawn by classifying material. The objection is very often heard: Why does the dream have an unconscious content at all? In my view, this objection is as unscientific as possible. Every actual psychological moment has its special history. Every sentence I pronounce has, beside the intended meaning known to me another historical meaning, and it is possible that its second meaning is entirely different from its conscious meaning. I express myself on purpose somewhat paradoxically. I do not mean that I could explain every individual sentence in its historical meaning. This is a thing easier to do in larger and more detailed contributions. It will be clear to everyone, that a poem is, apart from its manifest content, especially characteristic of the poet in regard to its form, its content, and its manner of origin. Although the poet, in his poem, gave expression to the mood of a moment, the literary historian will find things in it and behind it which the poet never foresaw. The analysis which the literary historian draws from the poet's material is exactly the method of psychoanalysis.

The psychoanalytic method, generally speaking, can be compared with historical analysis and synthesis. Suppose, for instance, we did not understand the meaning of baptism as practised in our churches to-day. The priest tells us the baptism means the admission of the child into the Christian community. But this does not satisfy us. Why is the child sprinkled with water? To understand this ceremony, we must choose out of the history of rites, those human traditions which pertain to this subject, and

<sup>9</sup> *Jahrbuch für Psychopath. u. Psychoanalyt. Forschungen*, Bd. II, p. 465.

thus we get material for comparison, to be considered from different standpoints.

I. The baptism means obviously an initiation ceremony, a consecration; therefore all the traditions containing initiation rites have to be consulted.

II. The baptism takes place with water. This special form requires another series of traditions, namely, those rites where water is used.

III. The person to be baptized is sprinkled with water. Here are to be consulted all those rites where the initiated is sprinkled or submerged, etc.

IV. All the reminiscences of folklore, the superstitious practices must be remembered, which in any way run parallel with the symbolism of the baptismal act.

In this way, we get a comparative scientific study of religion as regards baptism. We accordingly discover the different elements out of which the act of baptism has arisen. We ascertain further its original meaning, and we become at the same time acquainted with the rich world of myths that have contributed to the foundations of religions, and thus we are enabled to understand the manifold and profound meanings of baptism. The analyst proceeds in the same way with the dream. He collects the historical parallels to every part of the dream, even the remotest, and he tries to reconstruct the psychological history of the dream, with its fundamental meaning, exactly as in the analysis of the act of baptism. Thus, through the monographic treatment of the dream, we get a profound and beautiful insight into that mysterious, fine and ingenious network of unconscious determination. We get an insight, which as I said before, can only be compared with the historical understanding of any act which we had hitherto regarded in a superficial and one-sided way.

This digression on the psychoanalytic method has seemed to me to be unavoidable. I was obliged to give you an account of the method and its position in methodology, by reason of all the extensive misunderstandings which are constantly attempting to discredit it. I do not doubt that there are superficial and improper interpretations of the method. But an intelligent critic ought never to allow this to be a reproach to the method itself, any more than a bad surgeon should be urged as an objection to



the common validity of surgery. I do not doubt that some inaccurate descriptions and conceptions of the psychoanalytic method have arisen on the part of the psychoanalytic school itself. But this is due to the fact that, because of their education in natural science it is difficult for medical men to attain a full grasp of historical or philological method, although they instinctively handle it rightly.

The method I have described to you, in this general way, is the method that I adopt and for which I assume the scientific responsibility.

In my opinion it is absolutely reprehensible and unscientific to question about dreams, or to try to interpret them directly. This is not a methodological, but an arbitrary proceeding, which is its own punishment, for it is as unproductive as every false method.

If I have made the attempt to demonstrate to you the principle of the psychoanalytic school by dream-analysis, it is because the dream is one of the clearest instances of those contents of the conscious, whose basis eludes any plain and direct understanding. When anyone knocks in a nail with a hammer, to hang something up, we can understand every detail of the action. But it is otherwise with the act of baptism, where every phase is problematic. We call these actions, of which the meaning and the aim is not directly evident, symbolic actions or symbols. On the basis of this reasoning, we call a dream symbolic, as a dream is a psychological formation, of which the origin, meaning and aim are obscure, inasmuch as it represents one of the purest products of unconscious constellation. As Freud strikingly says: "The dream is the *via regia* to the unconscious." Besides the dream, we can note many effects of unconscious constellation. We have in the association-experiments a means for establishing exactly the influence of the unconscious. We find those effects in the disturbances of the experiment which I have called the "indicators of the complex." The task which the association-experiment gives to the person experimented upon is so extraordinarily easy and simple that even children can accomplish it without difficulty. It is, therefore, very remarkable that so many disturbances of an intentional action should be noted in this experiment. The only reasons or causes of these disturbances which can usually be

shown, are the partly conscious, partly not-conscious constellations, caused by the so-called complexes. In the greater number of these disturbances, we can without difficulty establish the relation to images of emotional complexes. We often need the psychoanalytic method to explain these relations, that is, we have to ask the person experimented upon or the patient, what associations he can give to the disturbed reactions. We thus gain the historical matter which serves as a basis for our judgment. The intelligent objection has already been made that the person experimented upon could say what he liked, in other words, any nonsense. This objection is made, I believe, in the unconscious supposition that the historian who collects the matter for his monograph is an idiot, incapable of distinguishing real parallels from apparent ones and true documents from crude falsifications. The professional man has means at his disposal by which clumsy mistakes can be avoided with certainty, and the slighter ones very probably. The mistrust of our opponents is here really delightful. For anyone who understands psychoanalytic work it is a well-known fact that it is not so very difficult to see where there is coherence, and where there is none. Moreover, in the first place these fraudulent declarations are very significant of the person experimented upon, and secondly, in general rather easily to be recognized as fraudulent.

In association-experiments, we are able to recognize the very intense effects produced by the unconscious in what are called complex-interventions. These mistakes made in the association-experiment are nothing but the prototypes of the mistakes made in everyday life, which are for the greater part to be considered as interventions. Freud brought together such material in his book, "The Psychopathology of Everyday Life."

These include the so-called symptomatic actions, which from another point of view might equally as well be called "symbolic actions," and the real failures to carry out actions, such as forgetting, slips of the tongue, etc. All these phenomena are the effect of unconscious constellations and therefore so many entrances into the domain of the unconscious. When such errors are cumulative, they are designated as neurosis, which, from this aspect, looks like a defective action and therefore the effect of unconscious constellations or complex-interventions.

The association-experiment is thus not directly a means to unlock the unconscious, but rather a technique for obtaining a good selection of defective reactions, which can then be used by psychoanalysis. At least, this is its most reliable form of application at the present time. I may, however, mention that it is possible that it may furnish other especially valuable facts which would grant us some direct glimpses, but I do not consider this problem sufficiently ripe to speak about. Investigations in this direction are going on.

I hope that, through my explanation of our method, you may have gained somewhat more confidence in its scientific character, so that you will be by this time more inclined to agree that the phantasies which have been hitherto discovered by means of psychoanalytic work are not merely arbitrary suppositions and illusions of psychoanalysts. Perhaps you are even inclined to listen patiently to what those products of unconscious phantasies can tell us.

## CHAPTER VII

### THE CONTENT OF THE UNCONSCIOUS

The phantasies of adults are, in so far as they are conscious, of great diversity and strongly individual. It is therefore nearly impossible to give a general description of them. But it is very different when we enter by means of analysis into the world of his unconscious phantasies. The diversities of the phantasies are indeed very great, but we do not find those individual peculiarities which we find in the conscious self. We meet here with more typical material which is not infrequently repeated in a similar form in different people. Constantly recurring, for instance, are ideas which are variations of the thoughts we encounter in religion and mythology. This fact is so convincing that we say we have discovered in these phantasies the same mechanisms which once created mythological and religious ideas. I should have to enter very much into detail in order to give you adequate examples. I must refer you for these problems to my work, "*Wandlungen und Symbole der Libido*." I will only mention that, for instance, the central symbol of Christianity—self-sacrifice—plays an important part in the phantasies of the unconscious. The Viennese School describes this phenomenon by the



ambiguous term castration-complex. This paradoxical use of the term follows from the particular attitude of this school toward the question of unconscious sexuality. I have given special attention to the problem in the book I have just mentioned; I must here restrict myself to this incidental reference and hasten to say something about the origin of the unconscious phantasy.

In the child's unconsciousness, the phantasies are considerably simplified, in relation to the proportions of the infantile surroundings. Thanks to the united efforts of the psychoanalytic school, we discovered that the most frequent phantasy of childhood is the so-called *Œdipus-complex*. This designation also seems as paradoxical as possible. We know that the tragic fate of Œdipus consisted in his loving his mother and slaying his father. This conflict of later life seems to be far remote from the child's mind. To the uninitiated it seems inconceivable that the child should have this conflict. After careful reflection it will become clear that the *tertium comparationis* consists just in this narrow limitation of the fate of Œdipus within the bounds of the family. These limitations are very typical for the child, for parents are never the boundary for the adult person to the same extent. The Œdipus-complex represents an infantile conflict, but with the exaggeration of the adult. The term Œdipus-complex does not mean, naturally, that this conflict is considered as occurring in the adult form, but in a corresponding form suitable to childhood. The little son would like to have the mother all to himself and to be rid of the father. As you know, little children can sometimes force themselves between the parents in the most jealous way. The wishes and aims get, in the unconscious, a more concrete and a more drastic form. Children are small primitive people and are therefore quickly ready to kill. But as a child is, in general, harmless, so his apparently dangerous wishes are, as a rule, also harmless. I say "as a rule," as you know that children, too, sometimes give way to their impulses to murder, and this not always in any indirect fashion. But just as the child, in general, is incapable of making systematic projects, as little dangerous are his intentions to murder. The same holds good of an Œdipus-view toward the mother. The small traces of this phantasy in the conscious can easily be overlooked; therefore nearly all parents are convinced that their children have no

Œdipus-complex. Parents as well as lovers are generally blind. If I now say that the Œdipus-complex is in the first place only a formula for the childish desire towards parents, and for the conflict which this craving evokes, this statement of the situation will be more readily accepted. The history of the Œdipus-phantasy is of special interest, as it teaches us very much about the development of the unconscious phantasies. Naturally, people think that the problem of Œdipus is the problem of the son. But this is, astonishingly enough, only an illusion. Under some circumstances the libido-sexualis reaches that definite differentiation of puberty corresponding to the sex of the individual relatively late. The libido sexualis has before this time an undifferentiated sexual character, which can be also termed bisexual. Therefore it is not astonishing if little girls possess the Œdipus-complex too. As far as I can see, the first love of the child belongs to the mother, no matter which its sex. If the love for the mother at this stage is intense, the father is jealously kept away as a rival. Of course, for the child itself, the mother has in this early stage of childhood no sexual significance of any importance. The term "Œdipus-complex" is in so far not really suitable. At this stage the mother has still the significance of a protecting, enveloping, food-providing being, who, on this account, is a source of delight. I do not identify, as I explained before, the feeling of delight eo ipso with sexuality. In earliest childhood but a slight amount of sexuality is connected with this feeling of delight. But, nevertheless, jealousy can play a great part in it, as jealousy does not belong entirely to the sphere of sexuality. The desire for food has much to do with the first impulses of jealousy. Certainly, a relatively germinating eroticism is also connected with it. This element gradually increases as the years go on, so that the Œdipus-complex soon assumes its classical form. In the case of the son, the conflict develops in a more masculine and therefore more typical form, whilst in the daughter, the typical affection for the father develops, with a correspondingly jealous attitude toward the mother. We call this complex, the *Electra-complex*. As everybody knows, Electra took revenge on her mother for the murder of her husband, because that mother had robbed her of her father.

(To be continued)

## TECHNIQUE OF PSYCHOANALYSIS

BY SMITH ELY JELLIFFE, M.D., PH.D.

(Continued from page 75)

In the domain of gastro-intestinal disturbances one constantly meets with this interrelationship of the physical and psychical. In the great majority of cases, the analyst sees the patient only after many months of ineffectual gastro-enteric therapy. Under such circumstances the need for analysis is obvious. Gastrointestinal references are the most frequent in the psychoneuroses.

"Man lives to eat" and probably more libido enters into the average man's gastronomic ceremonials than into any other type of expression. It is not to be wondered at, therefore, that the "stomach" should play such a large part in the neuroses and that such a mass of ignorance and superstition should still be found in all classes of society relative to the nutritive instinct. Extremely primitive and animistic notions concerning the food function and the processes of digestion, still hold sway even among physicians. The dietary fads of the latter have been subjects for ridicule and satire for years and not without a certain measure of justification. Concerning these and the general subject of the nutritive instinct more will be said later.

Before passing to the consideration of the detailed history of the patient which is necessary from the psychoanalytic standpoint, attention should first be directed to those types of patients who should not be analyzed.

### WHAT PATIENTS NOT TO ANALYZE

Perhaps the most important thing for the beginner *to know* is *what not to analyze*. Even the trained analyst may find to his distress that he has unwisely started a psychoanalytic procedure to learn later that the method in general will not bring about the hoped for result, *i. e.*, the betterment of the patient.

Experience is rapidly accumulating relative to this matter and it is my purpose to discuss the bearings of this experience in the following paragraphs.



The *what not* to analyze is intimately related to the *why not* analyze and hence they must be discussed at the same time.

In most respects there are no rules pertaining to psychoanalytic methods which do not apply to other methods of investigation utilized in medicine in the large. Being methods dealing more particularly with psychical activities going on in the human organism, which activities are plastic and variable, at first sight the material obtained seems more intangible than that obtained by the use of methods which investigate the workings of nature at other levels, *i. e.*, the vital and the physico-chemical. To illustrate: let it be assumed that certain tests are made to determine the sensory and motor functions of a limb. That these modes of examination have revealed paralysis with flaccidity, hypotonus, diminution in electrical response, defect in epicritic discrimination, painful nerve trunks, swollen, boggy, skin, mild cyanosis, etc. These results lead one to conclude that the peripheral sensory and motor neurons in the affected area are undergoing certain alterations. These the science of neurological medicine summarizes under the broad symbol "neuritis." The *facts* are tangible, one says, because the *symbol*, neuritis, can group them and handle them as an entity. Intelligence puts the facts—apparently quite definite and determined—together, and draws what it calls a logical conclusion.

The beginner in neurology, it is true, may assume that only one *thing* is represented by the *term* neuritis, and his query may be how to treat *neuritis*, *i. e.*, a symbol, not a thing. The more experienced neurologist is aware that after all there is no dynamic conception behind the term neuritis—the word only symbolizes a series of results and contains only indirect reference to causes—*i. e.*, changes induced in nerve impulse conducting structures (nerves—muscles) by various agents, toxic and mechanical. Enquiry should reach out for a genetic conception, and finds it either in alcoholic, diabetic, typhoid, influenza or other type of poisoning, or in mechanical factors due to a syphilitic meningitis in the cervical cord, dura, a spinal cord tumor, an osteoarthritis of the cervical spine, a cervical rib, etc. Determinism now stands revealed; ignorance is dislodged, and intelligence applies the best possible means, chemical or surgical, to overcome the difficulty. This is called logical. The whole chain of

events is based on determinism of facts seen at vital, *i. e.*, sensori-motor levels of the nervous system. One might find illustration after illustration which on final analysis would be reducible to the single thesis of determinism in the facts of nature at least so far as physico-chemico-vital combinations of phenomena are concerned.

As we have seen, the psychoanalytic method assumes the same postulate, namely determinism for that category of facts which, so far as we are now able to see, may adequately be grouped under the symbol psychical. The very criteria to be applied in solving the "neuritis" problem, here used as an illustration, are pertinent for psychical situations. If the facts obtained seem intangible, incomprehensible—such terms denote simply our ignorance of the final determinants, *i. e.*, the dynamic factors. There can be no intangibility resident in the facts. To say the facts are incomprehensible is a rationalization of individual ignorance.

Ignorance, however, may be no fault. It becomes so only when the individual permits himself to rationalize it, *i. e.*, give it a disguise, which effectually blocks him in the utilization of his intelligence, which might otherwise solve the problem in hand. Rationalization, therefore, becomes a Janus faced servant of both ignorance and indolence, permitting neither to recognize the other and thus it proves an aid to inertia, that fundamental property of matter which in our school days we defined as "that property by which a body at rest tends to stay at rest until set in motion."

Fortunately, however, for human evolution, Newton's theorem goes on to say that "when set in motion it tends to remain in motion until stopped." Therefore, if one is able to recognize ignorance frankly—is able to avoid rationalizing it, such an individual may be free to choose his pathway.

But then, why do we say there are patients who should not be analyzed? Is this a rationalization of ignorance?

Let us examine into this? Is it *impossible*, or is it *unwise* to analyze them? If impossible, why? and is such a permanent or a temporary condition? If unwise, it is (a) Because it will be of no service to them; (b) Are there advantages and disadvantages; (c) Do the disadvantages work (c, 1) against the patient, (c, 2) the social body, (c, 3) oneself; (d) Would psychoanalysis be distinctly *harmful* to patient, to society, to self?

Stated in tabular form, we have the following general scheme for discussion.

- I. Impossible to use psychoanalysis.
  - (a) Always.
  - (b) Temporarily.
- II. Unwise to use psychoanalysis.
  - (a) No service, neither good nor harm; never, or just then.
  - (b) Advantages of psychoanalytic treatment less than its disadvantages.
    - 1. Disadvantages to patient.
    - 2. Disadvantages to society.
    - 3. Disadvantages to analyst.
  - (c) Do harm
    - 1. To patient.
    - 2. To society.
    - 3. To analyst.

I. *The Impossible Cases*.—The first type of patient that cannot be analyzed is the ignorant one. Under this heading a great variety of patients pass in review. In the first place are the idiot and imbecile. Many despairing parents hear of the new discovery, "psychoanalysis" and they bring their idiot or imbecile children to be "cured" by the psychoanalyst. A neurological examination may reveal the dynamic factor; either an hereditary defect of transmission, a birth injury, an infantile encephalitis, a congenital syphilis, etc. A Binet-Simon test affords a rough and ready means of obtaining the patient's intellectual status; a careful pedagogic enquiry estimates the grade of the chances of educability.

The problem now arises, just what series of criteria will determine the character of the advice to the parents, so far as psychoanalysis is concerned? If study of the dynamic factors of the defects should reveal that there is a hope of relief, *i. e.*, one can remove a working cause such as possibly in congenital syphilis, in cretinism, in a number of defective states due to definite sensory losses (bad eyes, ears, lymphatic constitution, dysthyroidism, dysgenitalism, etc.)—then the advice to the parents should be that at the present time the patient should be treated for the causative factor. Psychoanalysis can be of no service until later possibly. Afterwards the question may come up as determined by the results of surgical or specific opotherapy.



Should no such possibly alterable dynamic factor be revealed, and should the real causes for the defects stand out as unsurmountable, and a Binet-Simon or other series of intelligence tests show inability by the patient to grasp abstract ideas, *i. e.*, mental age of five to seven,<sup>1</sup> then one must tell the parents that psychoanalysis, while it may prove of great value in clearing up certain scientific facts which may be of some service to the mass of science, and hence indirectly valuable to society at large, so far as this particular problem is concerned offers no adequate return to the individual patient. The condition is not treatable by the psychoanalytic method. The still further question of advice as to treatment in general does not lie within the province of these remarks.

But should the analyst, either as general practitioner, or neurologist, undertake the treatment of the patient, although he may have attempted to make it very clear to the parents and friends that psychoanalysis is of no service and that he cannot use it, nevertheless he must be prepared to hear the criticism that "psychoanalysis is of no service, because Dr. so-and-so (himself or other physician) treated so-and-so (said idiot or imbecile) by it, and he did him no good," all based upon his particular "failure" in the type of patient just discussed.

To show that this is no fantasy, I shall state that I received a letter from a parent in a Western town relative to treatment by psychoanalysis of an imbecile daughter—apparently determined by an epidemic cerebrospinal meningitis at the age of 4-5. In short, I declined to treat the patient, and gave the names of a few schools where feeble-minded children are cared for and trained, and there the matter ended so far as I knew. I do not know how to characterize my reactions when, from a neurologist of reputed attainments, I learned a year or so later of the bad results of psychoanalysis at my hands, in this individual case.

This is a extreme type of misrepresentation that has caused "the evil things said of physicians," not outside of their ranks, but even within them, from the Roman Pliny's first characterization of the Greek physician Asclepiades of Bithnia to Bernard Shaw's skit in the "Doctor's Dilemma." A liberal dose of humor

<sup>1</sup> See Colvin and Goddard in White and Jelliffe, *Modern Treatment of Nervous and Mental Disease*, Vol. I.

will aid the beginner to digest such misrepresentations in his early attempts to do the right thing.

What should be the advice if the patient be shown to be able to use abstract ideas, and yet be a high grade imbecile or moron?

Here it is imperative to recognize that for the beginner at least, and especially for the young beginner, psychoanalysis is of little or no service.

Many of these patients slip over into the group where possible harm can result. The harm can result if the analysis is clumsy—as it is apt to be by the beginner, and secondly, results, in reality due to the imbecility, feeble-mindedness, etc.—chiefly in the field of sexual delinquencies—will be attributed to the analysis. Furthermore if a positive transference is set up matters may be then rendered very difficult and even dangerous (socially) for the analyst because of the patient's abundant sexual phantasies. This feature will be discussed more fully under a later section.

In general then all feeble-minded types are inapplicable to psychoanalysis so far as therapeutic aims are in view.

The contrasting or *demented* types form another large group. Here "dementia" is used as a broad and loose conception similar to "feeble-mindedness." Yet the same criteria may be applied to them. If the deterioration of a once fairly average intelligence is a result of irreparable factors, and the grade of deterioration is such, as outlined by intelligence tests (Sommer, Ziehen, Kraepelin, etc.), that intellectual plasticity is gone and new concepts cannot be grasped, then psychoanalysis is impossible.

There are a number of older patients who by reason of emotional upsets (loss of wife, husband, or money) appear far more deteriorated than they really are. Here a partial analysis may clear up the emotional disturbance and render the patient far better able to handle his conflicts. As a rule a complete analysis is unnecessary—often impossible. There may be enough plasticity for these patients to grasp the chief mechanisms at fault. They are not growing old gracefully, one might say, but they are not plastic enough to be made over and the analyst is unwise who would attempt it. (This group will be discussed later chiefly under the symptomatic and presenile depressions.)

General paresis is not to be analyzed save from the standpoint of scientific interest. Inasmuch as cyto-biological tests should

make it impossible to confuse the early "neurasthenic" signs of paresis with a psychoneurosis, there is now little justification for the loss of valuable time entailed by the use of *any* other form of treatment than that for the syphilis.

Patients with other dementing processes, alcoholic, presenile, tumor, etc., are likewise impossible and should be rejected. Very valuable psychoanalytic material may be obtained from the "ramblings" of a senile dement, or a paretic, but such apply to the interpretative art which may be of service for other patients rather than of value in the treatment of the producer of the symptoms.

Acute maniacal states are manifestly unapproachable—*i. e.*, so far as the present outlook is concerned. The productivity of such patients is often readily analyzable, and one's psychoanalytic comprehension obtains invaluable illumination from them; one may obtain a complete picture of the entire conflict as it is bursting like a Gatling gun.<sup>2</sup> Such an interpretative analysis may be of great service later on when the patient has made a spontaneous recovery but practically all attempts to modify the course of an acute excitement in a manic-depressive psychosis by analytic procedures have proved unavailing.

Similar conditions rule in other acute excitements. Acute and subacute deliria may be impossible to analyze if very acute. The subacute delirium of alcoholic hallucinosis in an intelligent individual may give surprisingly good results by analytic treatment, however, and also lead to the uncovering of the motives for the alcoholism.

Acute katatonic excitement is unapproachable. If a positive transference becomes established the patient may be controlled somewhat, but there are few analysts who have worked enough with katatonics to enable them to establish a working transference. Acute depressed states are very difficult or impossible for the beginner. They are nearly all potentially suicidal and all of the precautions of the older methods, especially in guarding against self-destruction, must be held in mind<sup>3</sup> in approaching these cases. Psychoanalysis reveals suicidal ideas earlier and more definitely than any other procedure and hence is justifiable for a short time.

<sup>2</sup> McCurdy, State Hospital Bulletin, 1913.

<sup>3</sup> See Farrar, White and Jelliffe, *l. c.*



Mute patients are unapproachable, but it should be remembered that there may be patients who while verbally mute yet speak in every movement of the body. Only the trained psychiatrist with analytic tendencies can interpret these, however, and they should offer only opportunity for observation and study rather than hope for therapy in the hands of a beginner. I have sat by a mute katatonic for an hour attempting a variety of openings with all the zest which in my younger days had been given to a game of chess. One must be anxious to do just that sort of thing if one hopes to surprise nature into giving up a psychical fact.

These are the chief impossible types. Later on some of them will be discussed more in detail.

II. The groups for which psychoanalysis would be *unwise* are naturally less capable of clear formulation. Wisdom and lack of wisdom being comparative terms their use as guides to conduct imply that the problems are open.

There is a group of patients which do not come within any clinical classification so far as neurology and psychiatry are concerned for whom psychoanalysis is not impossible but for whom we can expect little from its application. Its application is not going to cure the patient. Some help may be hoped for, but in general the patient has established a fairly good working basis for himself and does not really intend to be disturbed.

It is highly important to recognize this group with its subgroups for there are many individuals in them, and as it is the habit of such individuals to go from doctor to doctor they are the chief factors in carrying gossip, and in giving the usually very tenuous basis for the misinterpretations which result, not directed to psychoanalysis alone, but in all branches of medicine. I call them the "little bird" group. They are all types of personalities, but most of them have little interest in anything, are somewhat introverted, but are capable of establishing a superficial rapport with great ease, and fall away quickly to seek a new attachment. One cannot escape them. Whether one treats them or not they will say things to the next claimant for their favor which conscious as well as unconscious rivially seizes upon to augment bad feeling among us. They are not infrequently superficially clever. There is an active and passive subgroup. The women are chiefly in the former, the men in the latter. The former are more mali-

cious in their comments on the other doctors. They seem to like to set each other by the ears. They give, if one allows them, the petty gossip of the households. They know all the "backstairs gossip." "Dr. So-and-so treated them for this, but Dr. So-and-so said it was that, and now you are the only one to understand." They are interesting semi-invalids, at times even "kittenish."

Many of these patients do not care to get well. They use their neurosis to keep up a type of "peeping." They will not see themselves, and have little courage to do any real work. Parasitism is a marked unconscious factor. They are molluscs, either dependent upon a mother, a father or brother, or a rich uncle, or some benefit society. The doctor is a vicarious ever-changing substitute, and they give him the little tittle-tattle about his fellow practitioners that he not infrequently though often unwittingly likes.

When once embarked on an analytic treatment with these patients they hang on and on so long as their small vanities and foibles are undisturbed. When the analytic probe bears heavily upon these they pout and fall away. A strong insistence upon having "backbone" and "standing up to their task" causes a further flight, this time perhaps to the gastro-enterologist, or the gynecologist, or what not, and the analyst wakes up to find that his work has only contributed to the patient's autoerotic phantasies, usually of an infantile or adolescent type. Only a wide experience will make one acquainted with all the variants of this type. Essentially they do not wish to get well. To do so would make them have to work, and this is impossible.

*(To be continued.)*

## CRITICAL DIGEST

### SOME FREUDIAN CONTRIBUTIONS TO THE PARANOIA PROBLEM

BY C. R. PAYNE, A.B., M.D.

*(Continued from page 93)*

In an article by DR. A. MAEDER of Zurich, "Analyses of Two Cases of Dementia Præcox (Paranoid Form)",<sup>1</sup> the author presents two interesting analyses showing the mental mechanisms in the paranoid form of dementia præcox. The reader should remember that an abstract of an analysis is at best very fragmentary and often destroys the clearness of the original; it is hoped that all who are interested in following these psychological investigations may read the whole article in the German.

#### (a) CASE J. B.

1. *Clinical History*.—Patient was born in 1869. Father died of phthisis. Mother died in 1883. One brother healthy. Patient is married and has three children, all of whom are somewhat weak physically. Wife at one time in sanitarium for pulmonary tuberculosis. As a young boy, he received an injury to the right eye from a snowball which has left a difference in pupils and spot on the cornea. He often suffers from conjunctivitis. Was bright in school. After two years in the secondary schools, he became a salesman. In 1886, he was cashier and buyer for a small store. In 1894, became bookkeeper for a mercantile establishment. His chief speculated and was discharged for shortage in his accounts. J. B. was promoted to position of chief. He had to put the business on a firm basis again and also prosecute in the courts his former chief and other members of the firm. Patient at this time was in the town-

<sup>1</sup> "Psychologische Untersuchungen an Dementia præcox Kranken," von Dr. A. Maeder (Zurich), Jahrbuch für Psychoanalytische und Psychopathologische Forschungen, Vol. II, Part I, 1910.



council, member of athletic and shooting societies, affable and well liked.

About 1900, he became excited, seemed overstrained and more and more peculiarly reticent. In 1901, his office was broken into at night and 1,800 francs taken. J. B. became very troubled and thought he was suspected of having been a party to the burglary. He had anxiety of being arrested on the streets, feared there were policemen waiting for him; at night, he made his wife help him hunt in the house to see that the money had not been secretly hidden there to bring suspicion on him. He began to withdraw from political activity, went to his work irregularly, complained much of headache (forehead and vertex) and acted peculiarly toward his business associates.

In summer of 1901, he went for treatment to Churwalden and in October on advice of his physician, to Lugano. He used considerable money and spoke of the purchase of a beautiful villa for which he did not possess the funds. He was so restless nights that the landlord had to request him to leave. Then he suddenly began to go to church on Sunday in high hat and black coat; he had expensive headstones erected for his parents. He slept a few nights at a very expensive hotel. He became very indifferent toward his family, many times vexed with his wife, which had never been the case earlier. Until this time, he had been a very good man. Now he began to talk of divorce; he must marry another of higher order. "Wife and children will then receive a pension." In March, 1902, he wrote to Queen Wilhelmina and asked her for a place. For Louis d'or (gold pieces) he had a regular passion at this time and did not wish to pay out any gold. On account of his delusions and growing indifference toward his family, he was brought to the asylum for observation with diagnosis of progressive paralysis (May 5, 1902).

When he arrived, he was oriented for time and place. Perception good. Attention and memory also good. He stood a test of his intelligence well. Affectivity, abnormal: indifferent disposition, dull euphoria. Delusions: he was morgannatic husband of Queen Wilhelmina, had met her many times in Zurich and neighborhood and in third class railway carriage. Delusions of reference: he interpreted everything, even the most innocent remarks in relation to himself. Grandiose delusions: he came

from the Orleans family; was also a son of Napoleon I; his wife came from a royal Belgian Catholic family. Disturbances of special senses: he heard voices from a woman, has the bodily feeling of the presence of Queen Wilhelmina. Told of earlier visions (at death of his mother), also later in O. he had heard the General March played in the night; he had gone to the cemetery but had seen nothing except a shining thing on his mother's gravestone, it might have been a star. Differences of pupils present. Reaction on both sides prompt. Physically, nothing abnormal except active tendon reflexes. On July 10, 1902, he was released unimproved with diagnosis of dementia præcox, paranoid form.

At home, he remained idle, sat most of the time in his room with closed shutters; in the months preceding his second commitment (March, 1903) he complained that his wife wanted to poison him. He was vulgar and violent toward his wife, accused her of being unfaithful, etc. Received at asylum again July, 1903. Condition much the same as before except that he hallucinated a good deal and was at times quite excited. He would not work, stood much of the time by the window, spoke much of his children, whom he said were persecuted like himself. Considered the physicians as members of a plot; his persecutors were organized into a society.

In December, 1903, he asserted that a meeting of his judges took place in the medical office, the director of the asylum was the investigating authority. The attorney for the Confederation K. was also present. Recently he had been at a meeting of the assizes where it was asserted he had practiced homosexuality. His attitude toward the physicians was always mistrustful and threatening. In January, 1904, he asserted that a meeting of the physicians of the Canton took place in front of the house; he had been able to follow the transactions. The assistant physician, W., has been put out of the association; he cannot longer practice psychiatry. He had heard that one of his sons was to be shot. June, 1904: His affairs would be very simple if one would only assume that his real name was "Bonaparte" and Joh. B. only the name of his foster-father. January, 1905: Many hypochondriacal complaints. He is injected with all kinds of poisons; he has "shining eyes" (of the so-called Gens ulpia) which are at the

bottom of this treatment ("chloride injections"). Brass slides are introduced into his eyes. He is shot in the eyes with a "projector"; he hides his head under the bed-clothes to prevent it. 1906, he was somewhat more accessible but still full of delusions, heard many voices. A worse period set in; he became restless, had to sleep nights in a cell where he was much plagued. He gradually progressed from the best ward to the most noisy. In August, 1906, a wart was cut off which made him very woebegone. He washed the place for a quarter of an hour. 1907, still in the ward for excited patients. January, 1908: In spite of the fact that he is still in the cell division, it has been possible to educate him to work. He works eight hours in the fields, is again more accessible to physicians but holds fast to his delusions. In his free hours, he stands alone in a corner of the courtyard with cap over eyes. Often excited, complains of his sufferings; frequently practices peculiar gymnastics concerning the meaning of which he will give no information: suddenly swings both arms forwards and laughs or stands with legs apart and strikes popliteal spaces with his fists, making involuntary bows.

2. *Analysis*.—The psychoanalysis was begun while the patient was in the ward for excited patients. During the course of the analysis, he improved so that he could be transferred to the quietest open ward. This improvement has lasted  $1\frac{1}{2}$  years. Maeder does not assert that the analysis caused this improvement but merely calls attention to the occurrence. The patient was intelligent and took a certain interest in the analysis. He had an outspoken transference upon the analyst.

*Results of the Analysis*.—The final, actually precipitating agency in the psychosis was the burglary of the patient's office. From that moment on, the disease was outwardly manifest, especially the ideas of persecution and of grandeur, which had formerly appeared only episodically and isolated (gravestones for parents, stopping at expensive hotel). At this time, two complexes of ideas were especially emphasized: (1) power (money, high birth) and (2) sexuality and everything pertaining to it. After eight years, these same complexes are still plainly visible. Ideas of persecution and grandeur may be shown with both complexes. The analysis shows numerous bridges joining these parallel series of ideas. They are not sharply differentiated and their



separation is rather artificial but useful for the sake of clearness.

*A. Complex of Sexuality.*—Patient had gradually become indifferent to his wife (1901-2). He says "the brunettes are hard to satisfy." (His wife is a brunette.) He himself is blue-eyed and a dark blonde, a condition which plays an important rôle in the later development of delusions. "She has a hot temperament." He must marry another, a blonde (the first intimation of an impotence complex, he needs new stimulus, his wife demands too much). As transitive form of this wish, a delusion appears that his wife has secretly had an abortion performed, is untrue to him. As confirmation of the fear of impotence may be mentioned the patient's inability to give the number of his children correctly, always making it too many; once he claimed five, then a whole crowd of legitimate and illegitimate children and always asserted that he had twins. In reality, he had three children. He says "they wished to ruin him" that is "make him directly impotent" (own expression); he is persecuted and maltreated sexually in cruel manner by injections of poisons into his eyes, abdomen and indeed anus. They will spoil his wonderful "shining eyes," ruin his testicles. Here appear also delusions of persecution of homosexual nature, injections into anus, hallucinations of voluptuous men in dreams. His enemies accuse him of infecting his boys with syphilis in the anus and eyes.

Another indication of homosexuality is the fact that the patient was discovered in bed in the private room of another patient in the ward. The latter was an invert and had been committed for these practices, which the patient knew.

The collected expressions of the patient regarding sexual things may be summarized as follows: polygamous tendencies, repressed homosexual inclinations, fears of impotence (these elements are all to be seen with plus or minus signs as persecutions, compensatory wish fulfillments, etc.).

Hypochondriacal complaints: pains in vertex and forehead, especially in the eyes. He often bathes his eyes, ordinarily with water but sometimes with milk or indeed lemonade which has caused conjunctivitis. He also rubs his eyes much. The pains arise from poisonings, from injections of "green acid," "green poison," chloral hydrate, morphine, phosphorus, sulphur and other "green poisons." They wish to destroy the wonderful

beams of his blue eyes, the "fructifying rays" which belong only to his race, the so-called *Gens ulpia*. Eyes with him are associated with sexuality. He likes baths to wash off the poisons. He drinks water by the liter to carry off the poison. Rubbing the body with camphor is another purification measure and so on. Also he must practice onanism in order to get the poison out of his testicles.

Further, the patient suffers many persecutions: sharp instruments are used by his enemies, knives, daggers, needles, rifles, revolvers, "protectors." They are aimed at the eyes, the abdomen, the back, especially toward the lower parts, the anus. This has lasted years. Men enter his room at night and manipulate him with instruments. These undoubtedly arise from his homosexual tendencies. This is still plainer when we learn that the tortures are usually accompanied by pollutions. J. B. has often thought he had a salamander, a snake or worm in his anus. This is a frequent female phantasy with vagina in place of anus. The addition that he once had a salamander in his intestines, the passage of which was very difficult, sounds like a birth phantasy.

By the assumption of homosexual tendencies and persecutions, many things in the case become clear. For a schizophrenic, he formed a surprisingly good rapport with the physician. The clinging handshake was in itself long suspicious.

His phantasies showed a peculiar passivity. "Something was done to him." "Voluptuaries satisfy their lust on him." To the same train of thoughts belong his delusions regarding his sons. They are persecuted and martyred by knife thrusts in the back just like himself. By this transitivity, he seems to absolve himself for his homosexual inclination toward his sons. His enemies commit the tortures, misuse the boys, not he.

The persecution is here to be considered essentially a homosexual assault. The psychic impotence of the patient may explain the poisoning. He has many delusions concerning the fructifying rays which proceed from him, especially from his eyes. All women fall in love with him when he looks at them. The Queen of Holland is in love with him but his enemies have prevented their marriage. All great events of nature like volcanic outbreaks, cyclones, floods, etc., are connected with the

conditions of his body, etc., etc. These phantasies of extraordinary fruitfulness and power form a compensation for his growing feeling of insufficiency in sexual matters, his approaching impotence, they are clearly wish fulfillments.

*The Defence of the Persecutions.*—Against the persecutions of his delusions, the patient developed a correspondingly phantastic series of means of defence. Washing and rinsing the eyes and body, drinking much water, onanism to clear out the testicles, a special kind of gymnastic exercises and finally various pretended mechanical inventions like a flying automobile. All served the purpose of fortifying him against his enemies and their plots.

*B. Complex of Origin.*—In this abstract we can only touch on the salient points which the author has carefully worked out in detail from the patient's delusions in a most interesting manner. J. B. fancied he was of royal descent, tracing his lineage in a phantastic manner to the angel Gabriel. He said his real father was King Louis Philippe d'Orleans, hence his liking for gold pieces (Louis d'or) before mentioned. This portion of the article shows the productivity of the psychosis excellently and should be read by all interested.

3. *Resumé.*—Important for the development of the psychosis was the relation of the patient as a child to his parents. The mother, a blonde with blue eyes, was always the favorite parent; she seems to have had a strong influence on the character of her son. After her death, he had a vision of her as his guardian angel. The father was dark (eyes and hair). J. B. does not seem to have loved him especially. He calls him not only stupid but envious, avaricious, black and tuberculous. Still, the father must have exerted some influence on the boy, for he chose a wife who resembled the father in many ways, "dark, avaricious, insatiable, Catholic." The psychosis broke out after a fairly prosperous life shortly after he was forty.<sup>2</sup> It started with a delusion of reference, the content of which was related to the

<sup>2</sup> There is a discrepancy in the text here. According to dates given in the clinical history, J. B. was born in 1869 and committed in 1902. He would thus be only past thirty when the psychosis broke out. Whether the error lies in the former date or in the age given above I am unable to determine.—REVIEWER.



business events of the past year. Episodically there appeared delusions of persecution and grandeur which were gradually systematized. By degrees, the psychic material became separated into two great groups, the delusion of persecution and the delusion of grandeur. It is interesting to observe each group by itself. I quote the author's description:

"The maternal traits which we have mentioned above become the typical traits of a special race, the 'Gens ulpia.' At first there are only female members outside of B. himself and of course the mother is one and the blonde queen of the Netherlands with whom he believes himself morganatically married another. From the mother, he comes by clang association to a glorified genealogical table (from Anna Kündig (mother's name) to Königin Anna, Johanna von Orleans, etc.), which goes back through most of the royal families of the world to John (Johann) the Baptist, Abel, Prometheus and the Archangel Gabriel. The family is called the St. Johannis family (patient's name is Johann, the mother's Anna). Everything great and good on earth has been made by him. Mere earthly greatness does not suffice. The eyes of J. B., which for numerous reasons (stated in the text) assume a central position, become cosmic forces; by their rays, they fructify the whole world, they contain the force of gravitation, they are Heaven itself.

"To the second group belong the persecutors of the patient, at first vague figures which torment him in the most cruel manner imaginable, maltreat him with all kinds of instruments and poisons (the whole physical delusion of persecution). Gradually, the manner of persecution becomes more precise which is in great part of symbolic nature, the persecution is chiefly a sexual one and indeed quite particularly an homosexual one. The chief traits of the enemies are derived from the patient's wife and father (in contrast to the traits of the mother); the members of the conspiracy are dark red-faced men, of an especial enviousness and insatiability in sexual matters and financial relations like their prototypes. They would completely ruin B., against which he protects himself as best he can by the elaboration of a complicated system; he utilizes even jokes and rebuses. The delusion gradually extends to everything which is negatively emotionally toned for him (clericalism, conservatism, social democ-

racy, etc.), ultimately coming to Satan himself, the personification of evil. Finally, out of the originally individual conflicts of B. which were grounded in the family constellation, an abstract struggle of good against evil has been evolved." The mechanisms involved will be considered after taking up the second case.

(b) CASE F. R.

1. *Clinical History*.—Patient was a locksmith in Zurich, single, Protestant, born March 8, 1869. Heredity poor, grandfather an odd man, mother eight years in insane asylum (paranoia?), three brothers and sisters psychopathic, two brothers and sisters very ambitious, feel themselves destined for "higher things." Father a teacher in the middle class schools, a brother teacher of drawing.

In the primary schools, a certain debility was noticeable. He lost courage and decided to become a gardener. After a year's trial, gave it up and became at fifteen locksmith's apprentice. As a boy, excitable and passionate, got along badly with his brother, when nine years old tried to strangle him, did not get on well with parents, would not be corrected and once would have struck his stepmother when she reproved him. Physically weak, had a severe catarrh of the lungs at fifteen. After his apprenticeship, he took course as machinist and fireman. In 1888, he traveled in Switzerland and South Germany, tried to go to Paris with twenty-five francs but could not for lack of money and finally came back to home town. He could not work steadily nor get on with his masters. Last two years before commitment, he stayed at home doing only odd jobs. Gradually, he began to show unmistakable signs of insanity; he was choleric, several times threw knife or fork at his brother or stepmother, was intolerant of alcohol, began to gesticulate and talk to himself; he wanted the money which his dead mother had left him (delusion), said the household could not exist without him, he must marry a rich wife, who had a "theological heart lesion," the good God had told him on Good Friday. There was an alliance against him. His father had made a botch of him, otherwise he would have been a great pulpit orator, the world is going to end in ninety years if they (relatives or parents) do not become great "Zofinger" before then.

He got physically and mentally worse rapidly and was committed to asylum, March 23, 1895, with diagnosis of primary paranoia.

*Resumé.*—We are dealing with a poorly educated, apparently untalented man who comes of a not uncultured family. In an independent position, he has completely failed. He is physically weak, nervous, poor and very ugly.

"It will be very interesting to compare these facts with the content of his delusions. In the psychosis, we recognize quite a different man: 'I enjoy culture and have made poetry about it. I feel unhappy that I have become a locksmith and not a farmer. Of late I have thought over how I would straighten it out, everything which pleases me I would get for myself. In this way, I have drawn and studied out plans in my head for three quarters of a year. I have heard voices which torment me, tease, prick me with needles, pinch me while they mean that I have injured them and have been gross with them, that is an alliance, I hear their voices, they are clear and sound like children's speech.'

"It has excited me, I have become angry, it was too stupid of me, I have insulted them together. It has not helped, they have begun again. I know why it all happens but I have no proof. They are noble people who feel themselves injured by me, etc. It is the Alliance of Princes, Zurich. People of Bahnhofstrasse (the finest street in the city). B. is the president of the Alliance, of the Union of nobles, who protest when they are injured. They are the capitalists, etc. I think I have seen them as they have come into my room in the night. I have then lighted the lamp but could perceive no one. Many times also, I have a peculiar taste in my mouth as if a little animal had done something on my tongue."

In the course of the period of observation, similar and other hallucinations were elaborated, for example, R. is helping with the dusting of the ward; suddenly he throws the brush away excitedly, "that is not allowed," he takes out his notebook and writes: "unallowed disturbance by the Madonna"; or he complains that someone is reaching into his brain with the fingers.

From these few statements one derives various material which will later assume a great significance in the delusional system of the patient: The patient is dissatisfied with his status; in the



phantasy he disposes things quite differently. He is persecuted by noble people of Bahnhofstrasse, they are rich capitalists. Something malicious is done to him, he is tormented. The modern diagnosis would be *dementia præcox* (paranoid form).

2. *Analysis*.—*A*. The persecutions, hypochondriacal complaints and feelings of insufficiency.

These persecutions take the form of various disturbances of his organs and their functions by higher powers, especially Satan and noble people. The manner of persecution is rather indefinite and not always described alike. Much of it has to do with the sexual organs. There are also female Satans who do improper things. Besides these, there was a more or less organized band of enemies who were envious of him.

Closely associated with the ideas of persecution were hypochondriacal ideas and feelings of insufficiency. He was and still is, so he says, sick from exhaustion following overdoing, has gout, feels something stuck into his great toe. He has disturbances of circulation and "distillation." He realizes that his head is wrong. He creates a mixed speech to describe his ailments.

*B*. *Compensations* (wishfulfillments). As described in the anamnesis, the patient came from the lower circles, father a teacher, stepmother had a restaurant. He received a very rudimentary education, made a failure of gardening and did not succeed much better as a locksmith. He is weak in body, even tuberculous at times, and has an ugly appearance. In a word, fate has been most unkind to him. In the psychosis, the patient seeks a rich compensation, the injustice is corrected in the phantasy by wishfulfillment.

First come the infantile wishes, he is a prince or saint and since he came from a teacher's family, a scholar. He had to do only with Excellencies. He creates a new speech of his own which he calls Excellencies' speech. He is still higher, he is a son by the direct line of the Savior. He is subject to the Savior but sometimes Christ himself, etc., etc.

In one field especially does he compensate richly in his delusions, that of sexual gratification. Denied this by his constitution and appearance, in his phantasies, he is beloved by proud and beautiful ladies, Italian, Swiss and French. In every country,

court ladies are in love with him, also teachers and others. His mother is a fine lady, Queen of Italy, often identified with the Madonna.

Another creation of the patient's mind was an elaborate anatomical system which, because of his limited knowledge, was most laughable. Although interesting, it does not demand our close examination. We may pass on after quoting the author's remarks on the conclusion of this part of the analysis: "Here we see the mechanism of projection in action. His own body is projected into the world, all activities in the curious system are also activities in the individual. Ultimately, all may be traced back to two components: on one side, the patient himself with the dear God, who he himself also is (with everything therewith connected, lifework, etc.), on the other side, the enemies, the strong ones having to do with Satan, the devil himself. Thus the conflict of evil with good." Maeder also takes up in detail the neologisms formed by the patient and shows that these are almost without exception capable of interpretation showing a real mental work.

Taking up the question of whether the patient had an actual dementia or only an apparent one, the author remarks that the patient's interest had been turned from the outer world and reality to phantasy life. The latter predominated to such an extent that adaptation to external realities failed. From the outside, the patient's behavior and speech seemed unintelligible and foolish but viewed from the standpoint of the patient's phantasies, all had sense.

*Psychogenesis.*—While Maeder is unable because of insufficient objective data to give a complete picture of the psychopathological phenomena in this case, he gives many interesting suggestions of how the disease probably developed. F. R.'s father was a teacher, a good citizen and stern man and although not greatly loved by his son has left an important impression on him. The patient constantly strives in his delusions for a higher intellectual standard, he develops a special Excellency speech, considers himself a scientific man, etc., etc. This continual striving toward intellectual preëminence undoubtedly comes from the influence of the father on the son. The relation of the patient to God and the Savior also probably arises from a transforma-

tion of his attitude toward his father. The mother furnished the model for the Madonna. Of his mother, the patient says, "she was tender and delicate, sickly and pious" which is objectively demonstrable, since she was in the same institution as F. R. and died of tuberculosis. Mutual traits of both appear frequently in the ideal figures created by F. R. in the psychosis: delicate, tender, distinguished, etc.

"Here as with all neurotics and psychoneurotics who are thoroughly analyzed, the polymorphous perverse tendency (Freud) may be seen; F. R. has for example in every city a beautiful court lady; the homosexual component also is not lacking and indeed exists in the repression (see this mechanism in the theoretical part, see also there the importance of the father for the origin of the passive persecution). R. is homosexually persecuted; something is done to him by young people and the "Cortez Preglia," the athletes, something done to his sexual organs, etc. In general, with him the sexual is deeply hidden under symbolism."

In a splendid word picture, Maeder thus sums up the case: "They (the delusions) are all true compensations; the patient does in the phantasy everything which nature has denied him. In the anamnesis, we wrote: 'We have to do with a poorly educated, apparently untalented man who springs from a not uncultured family; in an independent position, he has completely failed. He is physically weak, nervous, poor and very ugly.' In the psychosis, we have in contrast to do with a Docent and gentleman who speaks a highly polished esoteric language full of abstract expressions and who will associate only with scientific cultured people. He is the possessor of the great Winterthur works, the capital of the country and the earth; everything belongs to him, he springs from God himself. He is enormously rich (bank director and distinguished man); 'I was too charming, too gallant and handsome'; he became the object of envy. No less a person than the Devil himself begins the war against him, sends his forces, the mighty Alliance, against him. The conflict enlarges to a struggle of the highest power against the devil. F. R. thus attains a cosmic significance, the sum of the ideas of grandeur in general. His healthy, powerful body was severely injured by peculiar maneuvers. Now he is sick with us. The physical



persecution assumes a special character in that the body of the patient is projected out into the world and identified with it, the struggle against him is likewise called the struggle of evil with good."

#### THEORETICAL. CONCERNING THE MECHANISMS

(a) *Origin of the Delusion of Persecution.*—Briefly summarized from Maeder's resumé of J. B.'s case, the points are as follows: J. B. had certain polygamous and homosexual tendencies (instinctive in Freudian sense). Against the following of these, his wife stood as a hindrance. "There exists primarily in the patient an instinct for activity, for expansion in a definite direction. From without, an obstacle exercises an inhibitory action on this. This passive resistance is felt by the ego as an active resistance, it is as you might say, personified, changed to an aggressive force." The ease with which a passive resistance is conceived as a hostile force is illustrated by most insane patients' attitude toward the director of the institution in which they are confined. He is almost always considered an enemy.

This manner of reaction is not characteristic merely of the delusion of persecution but is a quite general kind of reaction. Children personify and try to punish inanimate objects on which they injure themselves. Xerxes had the boisterous sea struck with chains. The Indian bites the stone on which he stumbles. This personification of an obstacle is a primitive and universal type of reaction; it probably has a biological significance and serves for the defence of the individual.

We now consider how J. B.'s delusion of passive homosexual persecution arose from his homosexual tendencies. An example of a phantasy which Maeder obtained from a healthy young man seems to show this genesis in formation. "A young man sees a beautiful woman. There arises in him the wish to possess her. This thought is repressed as improper. Shortly after, the phantasy suddenly appears that the woman comes to him, will attack him sexually; she excites him so that he yields and she overpowers him." The patient J. B. had plain homosexual tendencies. In his paranoid phantasies, he suffered homosexual attacks. It is easy to assume that the change of the active instinct into the passive suffering occurred under the influence of

the repression as in the example given. This constitutes the mechanism which Freud has described as *projection*. The wish of the ego is projected upon the object of the wish and returns to consciousness as something from without. Another term for this process is "transitivism." This may be considered as a protective measure against unpleasant emotionally toned contents of consciousness.

*Generalization of the Delusion of Persecution.*—This comes about gradually by associations. Everything which contains a feeling of discomfort (Unlust) or can call forth such a feeling is arranged in the category of the bad and hostile. Everything good and pleasant belongs to the patient and his race.

*Origin of the Delusion of Grandeur.*—The dementia præcox patient gradually loses interest in the world of reality and withdraws himself from it. He loses the normal exchange between the individual and the external world and thereby the means for checking up the correctness of his ideas by objective standards. But, though the patient receives less and less from the external world and shows less and less interest in its affairs, his mind is not a blank, but builds a world of his own in which he is of greater and greater importance. "He is of wonderful bodily grace, enormously strong, immensely wealthy, allwise, etc." The activity of the instinct for expansion is held back from normal outlets in the external world and is applied to the ego, it is "introverted." All ungratified wishes of the past and present now run riot in the gratification of phantasy for the inhibitions of reality have been removed. It is easy to see how much the infantile can facilitate this process.

Another mechanism sharing in the formation of the grandiose delusion is *exteriorization*. For example, J. B. identified his eyes with the heavens or the sun, the "fructifying rays," etc. Organs important to the delusion are exteriorized. Ultimately the ego includes the whole world. The patient lives in a world which he has personified by his complexes. "The exteriorization is an expansion of the ego in contrast to transitivism which signifies a limitation. We come to the conclusion that the ideas of persecution and those of grandeur arise independently of each other but have in common the fact that both start from the life-instincts, from the realization of free or repressed wishes."

Maeder's concluding remarks, which are most interesting, may be summarized as follows: The analyses have plainly shown how in the psychoses all symptoms are related to some emotionally toned complexes of ideas, how they are to be considered as results or activities of these. They show that the content of the psychosis is strongly determined by individual elements but that the mechanisms are the same in both cases; that the motives for actions are relatively few and that most of them belong to the instinctive life of the infantile period.

There exists in these paranoid patients a lively mental activity of constructive character which shows itself in the paranoid system. A penetrating investigation by psychoanalytic methods justifies the conclusion that incoherency in chronic conditions is merely a misunderstanding and that of dementia as it occurs in the organic mental diseases there is no such thing. On the contrary, the patients think most actively.

The patients live in a dream world in which their unfulfilled wishes of childhood and in part of the present have come to fulfillment and indeed more, to a pathological compensation. This dream is so emotionally attractive to the patients that they have lost their interest for the outer world.

Further, the influence of the parents upon the child and the family constellation in its effect upon the development of the child is plainly seen. The transition from normal to pathological is not sharply demarcated but fluctuating; the psychosis does not build by new mechanisms but by exaggeration of existing ones; it creates on a basis of previous experiences and chooses from the present according to complexes in the mind. The life-instincts of normal activity (self-preservation, sexual instinct with its numerous component instincts) continue to act in the psychosis. Probably the interaction, the synergy, is lost.

*(To be continued)*



TRANSLATION  
WISHFULFILLMENT AND SYMBOLISM IN  
FAIRY TALES

BY DR. FRANZ RIKLIN

TRANSLATED BY WM. A. WHITE, M.D.

OF WASHINGTON, D. C.

*(Continued from page 107)*

Is it otherwise with our poets? Think, for example, of Gottfried Keller as mentioned by Bleuler.

We have seen that it is precisely those who have been disappointed in their social or in their love relations who put wish structures into their poetry.

Later we will see that the stepmother fairy tales are only a special group of tales with sexual wish fulfillment. The stepmother (in other fairy tales the corresponding rôle is generally played by a giantess or a witch, the stepmother is thus also in this relation a special case) is the enemy, the marplot in the sexual wish structure, who is vanquished. In many fairy tales she herself, in others her daughter, is the sexual rival. The first category shows, still clearer than the latter, her rôle in the fairy tale wish structure. (A further interpretation of the figure of the stepmother will be noted further on.)

In the oriental fairy tales the stepmother perhaps cannot play this rôle because the relation in the sexual domain is otherwise than with us.

"Cinderella" with its variations serves best as an example of a stepmother fairy tale; also "Dame Holle" (Grimm, No. 24). An icelandic Cinderella, where the stepmother is relatively secondary, we find in Rittershaus,<sup>3</sup> No. 66, with parallels to this theme. There is also a sexual symbolism contained in it (dog, fire, giant, burning the giant's skin), to which we will later return.

A peasant pair had three daughters, Ingibjörg, Sigrídur and

<sup>3</sup> A. Rittershaus, "Neuisländische Volksmärchen." Halle a. S., 1902.

Helga. While the two older sisters were treated as princesses the youngest had to do all the work and never received a good word for it. Once the fire in the cottage had gone out and as it was feared that Helga perhaps would embrace the opportunity to run away from the house Ingibjörg was sent forth to bring in some fire from somewhere. As she came by a hill on her way she heard spoken from inside "would you rather have me for you or against you?" She said that that was a matter of indifference to her and went on. Now she came to a great cave. In it meat was cooking over a mighty fire and nearby stood a pot of dough. She stirred the fire up and as the meat was nearly done she baked a good cake for herself from the dough and let the rest burn. Then she sat down and ate with a good relish. As she was eating an immense dog came in and sprang at her with wagging tail. Angrily she turned away from him but at the same moment he bit off her hand. Now she ran back to the bouse, without thinking of the fire, and related her mishap. With the second sister Sigridur it went no better, only that the dog instead of biting off her hand bit off her nose. Finally Helga must be dispatched to bring the fire. As she came to the hill the same question was put to her. She answered, however, quite differently from her sisters that nothing was so mean or insignificant that one would not wish to have it for rather than against one. In the cave Helga carefully cooked the meat and baked the cakes but did not take a bite herself. Tired and hungry she sat down to await the owner of the cave. After a time there were great crashes of thunder and a giant entered the cave followed by a great dog. He quieted the frightened maiden with friendly words. They sat down for the evening meal and then he let her choose whether she would sleep with him or his dog. Helga preferred the latter. After a while there came such a thunder clap that the cave trembled. The giant suggested to her, if she were afraid, to lay on the step near his bed. She gladly followed this suggestion. Still more awful thunder claps made her draw still nearer to the giant until finally she crept over him into his bed. At the same moment the giant's skin fell off and beside her lay a wonderfully beautiful prince. Helga quickly burned the skin and the young man thankfully greeted her as his deliverer. The next morning he related to her the story of his life. He promised soon to take her from

her parents' house and lead her as queen into his kingdom. On leaving her he gave her a splendid cloak that she could wear home under her rags. Then he presented her with a casket with all sorts of precious things and two rich dresses. These gifts she must not hide in spite of the fact that at home they would be taken from her. Also the dog gave her with his paw on leaving, a gold ring, and now she turned back with all her treasure and the fire to her home. Here she was treated worse than before and robbed of all her presents. After some time a beautiful ship came and anchored nearby. The owner of the ship inquired curiously of the peasant about his affairs and asked finally whether he had daughters. The peasant said he only had two and called the two oldest. They came in the clothes stolen from their sister, however, one hid her hand and the other had a cloth bound about her nose. The newcomer inquired curiously for the reason of this covering up until their mutilation was made plain. Now the peasant had to, in spite of all his opposition, bring in his youngest daughter. She appeared in her rags but when the stranger tore them from her she was clothed in a splendid cloak. The dresses and the costly articles stolen from Helga were taken away from the sisters and the prince went forth with his bride to his kingdom.

In this fairy tale there is hidden a rich symbolism with the interpretation of which we will busy ourselves later.

I might mention now two beautiful, typical, Russian fairy tales with the same motive: "The Frost" and the "Desert Story."<sup>4</sup>

*The Frost.*—Once upon a time there was an old man and an old woman who had three daughters. The wife could not bear the oldest for she was her stepdaughter. She quarreled with her, awoke her earlier and gave her all the work. She had to water and feed the cattle, carry the wood and the water, heat the oven and mend the clothes. She had always to sweep the cottage and put it to rights before daybreak. The old woman was however, in spite of this, always dissatisfied and faultfinding. "How lazy and disorderly, the broom is not in its place, this and that are wrong and the house is dirty."

The poor girl wept and was silent, she sought in every way

<sup>4</sup> Afanassiew, "Russische Volksmärchen." Deutsch von Anna Mayer, Wien, 1906. C. W. Stern.



to try to please her stepmother and to be helpful to her daughters. The daughters, however, acted just like the mother, they vexed Marfuschka, quarreled with her and when she wept they were pleased. They got up late, washed in water that was all ready for them, dried themselves with clean towels and did their first work in going to eat.

So the daughters grew up and reached an age to marry. The old man was sorry for his daughter; he loved her, because she was dutiful and industrious: she was never wilful, she always did what she was told without a word of objection. He could not, however, help the difficulties, he was weak, the old woman quarrelsome and the daughters lazy and stubborn.

The old folks considered: he, how the daughters could be married and she, how the oldest one could be gotten rid of. One day the old woman said to him: "Old man, we will marry Marfuschka."

"Good," said he, and went to bed on his stove. The old woman followed him and said: "Get up early in the morning, hitch up the horse to the wooden sled and take Marfuschka along. You, Marfuschka, get together your possessions in a basket, put on a clean skirt, for tomorrow you are going on a visit."

The good Marfuschka was rejoiced over her luck and slept sweetly all night. Early in the morning she arose, washed herself, prayed, packed up everything carefully, and dressed herself. She was as beautiful as a little bride.

It was winter and grim Frost reigned. Before sunrise the old man was up, he hitched up the horse to the sled and drove to the front of the house. He went inside, sat down on the bench and said: "Now I have everything ready."

"Sit down at the table and eat," said the old woman.

The bread basket stood on the table and he took a piece of bread from it that he shared with his daughter. The stepmother in the meantime brought some stale soup and said: "Now, little dear, eat and away with you, I have had to put up with you long enough! Old man, lead Marfuschka to her bridegroom, however, look out on the way, old fool, first go down the straight street and then turn to the right into the woods—do you know, right by the big pine, which stands on the hill, there deliver Marfuschka over to the Frost."

The old man opened his eyes and his mouth, stopped chewing, and the girl cried.

"What are you making such a fuss about! The bridegroom is beautiful and rich! Only think how many possessions he has: All the firs and pines glisten and the birches are all feathery. There is scarcely a more magnificent life and he himself is a mighty hero." The old man silently gathered all her belongings, ordered his daughter to put on her sheep skins and started on the way. He finally came to the pine, and turned from the road just as the snow began to fall. In the solitude the old man stopped, ordered his daughter to get out, set her basket under an immense pine and said: "Sit here, await the bridegroom and receive him pleasantly."

Then he turned his horse about and went back home. The little girl sat there and trembled, the cold benumbed her. She wanted to cry but she only had strength to shut her teeth tightly together. Suddenly she heard in the distance the Frost making a fir creek; he sprang crackling from fir to fir. Finally he was high overhead on the pine under which the little girl sat and he asked: "Little girl, are you warm?"

"Yes, father Frost!"

The Frost came down nearer, creeking and crackling still more than before: "Little girl tell me, beautiful girl, are you warm?"

The little girl had almost lost her breath but she still said: "I am warm father Frost."

Then the Frost creeked and crackled still more: "Are you warm little girl, are you warm beautiful child, are you warm my darling?"

The little girl was almost frozen and answered hardly audibly: "Warm, little father."

Then the Frost had pity and wrapped up the little maid in furs and warm coverings.

In the morning the old woman said to her husband: "Go, old fool, and awaken the young pair."

The old man hitched the horse to the sleigh and went to his daughter. He found her alive wrapped up in beautiful furs with a silk neckcloth and beautiful presents lay in her basket. Without saying a word the old man put everything in the sleigh, got

in with his daughter and went back home. There the little maid threw herself at the feet of her stepmother.

The old woman wondered very much when she saw the girl living and saw the new furs and the basket full of linen. "Eh, you can't fool me!" said she.

After a few days the old woman said: "Take my daughters to the bridegroom, he will give them still better presents." In the morning the old woman awoke her daughters, dressed them, as if she were sending them to their wedding and sent them forth. The old man took the same way and left the maids by the same pine. They sat down and laughed. "What occurred to mother to marry us so suddenly? As if there were not fellows enough in the Village! Who knows, what sort of a devil comes here!" The girls had great furs on but in spite of that the cold stung them.

"Paracha, the Frost runs over my skin, if the chosen one does not come soon we will freeze." "Nonsense Mascha, since when do bridegrooms come so early, it is only breakfast time." "Paracha! if he comes now who will he take?" "Not you, you goose." "You perhaps?" "Certainly." "Don't laugh." The Frost nipped the maids' hands. They put their hands in their furs and began again: "You sleepy child, you bad nuisance, you scold. You cannot spin and you never think of praying." "Oh, you boaster, what can you do then? In the spinning room you hang around and prattle. Wait and see who he takes." So the little maids quarreled and froze. "Why you are getting blue!" said they together. Far away the Frost crackled and snapped and sprang from fir to fir. To the maids it appeared as if some one was coming. "Ho, Paracha! he is coming; his bells are jingling." "Go on fool, the Frost is making me shake." "But will you still marry?" They blew on their fingers. The Frost came nearer and nearer, finally he alighted on the pine over the maids. "Are you warm little maids, are you warm beautiful little doves?"

"Oh Frost it is so cold. We are nearly frozen. We are waiting for the bridegroom and the devil does not come."

The Frost came down lower and crackled and snapped still more: "Are you warm little maids, are you warm my beautiful ones?" "Go to the devil! Are you blind, our hands and feet are already frozen off." Then the Frost came still further down,



stung hard and asked: "Little maids are you warm?" "Go to the devil and rot, cursed one!" Then the maids were benumbed. In the morning the old woman said to her husband: "Harness up, put hay and warm coverings in the sleigh for the girls will be cold. There is a strong wind outside! Be quick old fool!" The old man hardly allowed himself time for breakfast and went forth. When he came to his little daughters they were dead. He put them in the sleigh, wrapped them up in the rugs, laid the hay over them and turned homeward. The old woman saw him coming from a distance, and went out to meet him: "Where are the children?" "In the sleigh." The old woman put the hay aside, took off the rugs, and found the children dead. Then she set upon the old man like a tempest and abused him. "What have you done with my daughters? You old hound! My own, my sweet buds, my rosy berries! I will beat you with the broom stick, I will beat you with the poker!" "Be quiet old witch. You tried to get riches but your daughters were obstinate. I am not guilty, you did it yourself!" The old woman was angry and kept on wrangling, but later reconciled herself with the step-daughter and so lived a good and considerate life and no longer thought evil. A neighbor came and wooed and married Marfuschka. Things went well with her. The old man took the grandchildren under his care, frightened them with the Frost and bid them be willing and diligent.

*"Desert Fairy Tale."*—An old man lived with his wife. He had one daughter and she had one. His wife said to him: "Take your daughter away,"—and he took her in the dark forest. In the forest there stood a cottage and then he said to his daughter: "Sit here and wait while I go for a while and chop wood." He left, fastened a small board on a birch before the cottage, and went home.

The maid waited and waited for her father and the wind played with the little board. "My little father is chopping wood," thought she and went on waiting. But the day grew into evening. The sun set but her father did not come back. Night came on and the maid was still waiting. Between the trees there was extended, with some noise, a horse's head.

The head ran to the cottage and said: "Mistress, mistress, open the door!" The maid opened it. "Mistress, mistress, carry

me over the threshold!" The maid did it. "Mistress, mistress, give me some supper!" She gave it some. "Mistress, mistress, make me up a bed." She made one up. "Mistress, mistress, tell me some stories!" She began to tell one. "Mistress, mistress, climb into my left ear and climb out again by the right!"

She climbed into the left ear and out by the right and had become indescribably beautiful, then she seated herself in a golden coach with silver horses and started for her kingdom. First, however, she went home and gave her father and mother all the treasures of the world but to her sister, the daughter of the wife she gave nothing.

After a year had passed the old man was speaking with his wife when she commanded him: "Take my daughter forth, you know where! Take her to the place to which you brought your daughter."

So the old man took her daughter and led her into the dark forest. In the forest stood a cottage. Then he said to her: "Sit here and wait while I go and chop wood." The little board swayed and rattled in the wind. "What has the old turkey-cock fastened up there?" asked the maid angrily and listened. Between the trees the horse's head was noisily stretched. It ran to the cottage: "Mistress, mistress, open the door!" "You are not a great man, do it yourself." It opened the door. "Mistress, mistress, carry me over the threshold!" "You are not a great man, come in yourself." The horse's head came in. "Mistress, mistress, give me some supper!" "You are not a great man, get it yourself." The head got it. "Mistress, mistress, make me up a bed and put me to sleep." "You are not a great man, do it yourself." The head did it. "Mistress, mistress, climb into my left ear and climb out again by the right!" The maid climbed into the left ear and climbed out of the right and had become old, an old gipsy without teeth, with a crutch. She ran into the woods and drowned herself from grief in the marsh.

There are in fairy stories similarly masculine Cinderellas that at the end marry a princess.

The fairy stories, in which simpletons or imbeciles are affectionately treated as heroes, belong also partly in this category with wish fulfillment, partly however to the so-called farces. I mention, as examples, from the German fairy tales: "The story

of the man who went out to learn to shudder," "Jack in Luck," "Clever Hans," "The Three Languages" (Grimm, Nos. 4, 83, 32, 33).

#### IV

#### SYMBOLISM

In order to gain an insight into the meaning of the symbols of fairy tales we must first learn something of their origin.

A symbol is a sign, a short cut for something complex. When I see a post-horn near the name of a station on a railway time-table, it is clear to me that the station has postal connections with places which are not on the line.

The "Captain of Köpenik," a shoemaker and habitual criminal, insured himself the unconditional obedience of a number of Prussian soldiers in the robbery of the city bank, by wearing a captain's uniform, because the wearing of a uniform, and especially an officer's uniform, is a sign for a great mass of things and ideas, which it is not necessary to recount.

The symbol, however, has still more that is peculiar to it. Why does the sign of the post-horn and nothing else, represent on the time-table the idea of postal connections and the associated ideas. The post-horn is something that originally belonged to the post. Although it is not a necessary part of it, it was earlier one of the most concrete signs of it, less for the eye than for the ear. So we have two new sources of the symbol. That the sign chosen for the symbol has a significance in an inner or outer associative relationship and is concrete. Further it is so much the more appropriate as history and development are included in it, whereby it is, however, not without variations of significance. The times with us have pretty well gone by when the postillion lustily blew his horn. The horn as a sign, however, has remained, on the time-table, in the army, as the sign of a field post, and still in many other places.

With the idea of symbol there is usually associated something full of mystery. Symbols are often used as signs of recognition for secret societies, for example, the signs of the Free Masons. The secrecy also lays in the fact that only the initiated know the significance of the symbols. That, for example, was the case with the runic writing which only certain people could read; that also gives the ceremonials of the church their magical effects on



the susceptible soul. Already the development and the associated changes of meaning make it impossible that any but the initiated should be able to understand the significance of the symbols.

Because the symbol is only a sign, only a part of the original significance, so it is, that in its further development, it gradually becomes the sign for different things: The post-horn has significance according to the place, the surroundings, in the psychological sense, according to the various associations bound up with it. Mail stage-coach connections, when it is by the name of a station on the time-table, letter mail connections when on a letter box. In out of the way mountain villages it signifies still much more, and on the sleeve of a uniform, again something different.

Through this summation of meanings it comes that the sign is a condensation and an accumulation of all of these single ideas concealed within it. The characteristic of, for example, the dream symbol, is the thousand threads of association that run together (the dream of the portal). It results, at the same time, in an ambiguity of symbols. The double meanings can come out in all possible ways. Whoever is not initiated and does not know all the directions of the symbol, interprets it falsely or only according to his own idea. The bible, for example, has both the advantage and the disadvantage of containing many symbols which may be interpreted in the most varied ways.

The interpretation of the dream symbol has to get its value on the same grounds as it has been given by Freud on scientific foundations, so that we recognize the structure of the symbol and everyone who cares to can learn this science.

The ambiguity of the symbols has the disadvantage that thinking in symbols, that is resorted to in dreams and in many psychoses, especially in dementia praecox, here often to an unbelievable extent, is much less clear, defined and logical than is thought just in sharp, circumscribed ideas having to the greatest extent possible only one meaning. In this special sense one is quite right, with Bleuler,<sup>1</sup> Jung,<sup>2</sup> and Pelletier,<sup>3</sup> in designating

<sup>1</sup> Bleuler, "Freudsche Mechanismen in der Symptomatologie von Psychosen," *Psych.-neurol. Wochenschrift*, 1906, No. 35 and 36.

<sup>2</sup> Jung, "Ueber die Psychologie der Dementia praecox." Halle a. S., Marhold, 1907. See translation in Monograph Series, No. 3.

<sup>3</sup> Madeleine Pelletier, "L'association des idées dans la manie aigue et dans la débilité mentale." Thèse de Paris, 1903.

thinking in symbols as of less value, as inferior to logical thinking.

And yet what difficulties we have in our own language not to think in symbols! Is not nearly every word a symbol! All abstract ideas must be expressed by words, which at first, and often yet, have a concrete significance (for example, *wägen*, *wiegen*, *erwägen*, *gewogen*; or *gebildet*=*instructus* and *gebildet*=*accomplished*—in the sense in which it is used by Goethe=*geformt* (formed), for example, *ein wohlgebildeter Jüngling*=a well formed youth.) And what changes in meaning have they not already gone through.<sup>4</sup> The language of poetry prefers to work with words of ambiguous sense in order to give both meanings at the same time. It is not difficult to bring examples of symbols which unite within themselves, partly or wholly, these several qualities.

Letters are symbols, as their development clearly shows. Our mimic and gestures are in great part symbolic.<sup>5</sup> A geographical chart is a symbol. The concrete symbols for abstracts are noteworthy. The eye of God (omniscience), the scales (justice), the cross (Christendom; compare the Vision of Constantine: "in hoc signo vinces"); the color symbols: black=mourning; in the Catholic church violet is the mourning color; red=love, socialism, revolution; the black and red international; the military symbolism (power, intimidation, differences of authority, belonging to various countries); the anchor of hope, the symbolism of coats of arms and standards; one makes a present of something as a "sign of love"; the "fire of love," the pain of separation. The language likes to employ, besides those just named, also condensed symbols. One hopes, for example, to feather one's nest. In pictures of the middle ages and among such old culture folks, so long as their art stood at a more archaic stage (to stand on a step—*stufe*—is again a symbol of speech) the relative authority is expressed in the persons represented by differences in size, or

<sup>4</sup> I refer, for example, to Hermann Paul, "Prinzipien der Sprachgeschichte," III Aufl., Halle a. S., Max Niemeyer, 1898. The change in meaning can certainly cause a definite transfer so that the original meaning no longer serves at present. For instance the word "elend" in the middle and new high german.

<sup>5</sup> Compare Ernst Jentsch, "Ueber einige merkwürdige mimische Bewegungen der Hand," *Zentralbl. für Nervenheilk. u. Psychiatrie*, XXVII Jahrg., 15, VIII.

among kings and gods by a figurative representation of their attributes. (We find a beautiful example in an "Adoration" by Dürer in the old Pinakothek in Munich.)

Still we must hasten over these trains of thought in order to utilize what has been learned for our fairy tale symbolisms.

Here two symbolic series unite and often overlap; one develops from the aspects of magic, mythology, and religion, the other is the symbolism of dreams and of psychopathology. It is true they originate from the same spring, the human psyche.

In mythology the construction of symbols comes about in a different manner. First through personification. The forces that influence mankind are personified, natural phenomena and inexplicable inner experiences (dreams, nightmare). In place of the real, active forces, anthropomorphic beings are substituted. Whether these are to be sought in the departed souls, or whether they have another indefinite or later defined origin, whether they are incarnated in natural phenomena or are later thought of as controlling certain natural phenomena, is beside the point. There are very many stages in this aspect which sometimes exist together and sometimes follow one another. How far the analysis of such structures, such symbolic forms, which, originally simple personifications of a definite principle, have come to form fully built up personalities, may take us, is shown, for example, by the history of the devil.<sup>6</sup>

A new factor is now added to the symbol. The personified or unpersonified forces display some power, some effect. This effect becomes now transferred on its symbol, on its figurative representation, which belongs in its province, and so the symbol itself receives, besides its already named characteristics, a certain force and effect, which originally belonged to the whole which in part is represented by the symbol.<sup>7</sup> For this reason the devil can do nothing as soon as a place is protected by a cross or the sign of the cross. On the same grounds the pictures of the saints played such an important rôle with the Russians in the Japanese war and naturally also elsewhere. So in the old cults where the

<sup>6</sup> Gustav Roskoff, "Geschichte des Teufels." Leipzig, Brockhaus, 1869.

<sup>7</sup> Compare here the contribution of Prof. S. Singer-Bern: *Die Wirksamkeit der Besegnungen*. "Schweiz. Archiv. für Volkskunde," Jahrg. I, 1897, p. 102.



symbol of the gods of fertility, not simply their picture but the part, part of the whole, which represented concretely the fruitfulness, the phallus, was carried around in order to bring fertility to the fields, and still more, it was with the same object that young maidens were struck naked with a branch, a living branch, as a still more remote symbol, so that through this symbolic action the same object would be attained.

The cults themselves have also undergone a process of symbolization. Instead of human sacrifices, sacrifices of animals came gradually to be offered, then the animal was offered in some sort of imitation (formed of bread for example). The Chinese, for example, began to offer their divinities, instead of metal coins, papers representing them. The archives of ethnology are filled with examples, as the rational customs represent in great part remains of a strong symbolic cult.

Animals, of which a great number are and were sacred, belong to the symbols, which instead of a personified power of nature have become demons, god heads (the owls of Athens, the mountain serpents in the Erechtheion).

In the mythological tales and customs particular animals may assume a quite special symbolic significance, for example, a special sexual significance. At the feast of Dionysus, in which also fertility was sought, young male animals were offered up by preference. Zeus ravished Europa as a bull; Leda as a male swan. He impregnated Danae as a golden shower by the intervention of a symbolism which while not animal was clearly sexual.

Animals as representatives of sexual power are suitable as symbols insofar as that even in our speech and our general attitude the life-preserving principle is considered as the animal in man.

We are now arrived at a point where we can understand the symbolism of fairy tales, especially the sexual symbolism, so far as it springs from mythology and magic.

We must now approach it from the other side, the psychological and the psychopathological.

Freud explains in his "Traumdeutung" that the so-called dream-work is an effort towards condensation, in view of the representation of abstract things appropriate in a given scene, by the substitution of representable (concrete) things; that simi-

larity, agreement, likeness, are represented in the dream in the same way by bringing them together into a unity. Are not these moments which necessarily lead to symbolic construction? Then there is further the repression which compels the dream to indicate certain things in other forms, in a symbolism, which however, is only understandable to the initiated and which is hidden from the conscious ego. So much for the construction of symbols in the dream.

The following dream fragment will make us familiar with the symbolism employed therein, which in this case disguises a strong sexual theme.

The bridegroom dreamt. He was in the so-called long street of the town in which he had passed the years of his youth. A forest fire had broken out. He hastened with a certain anguish. Someone is near him whom he does not see. He knows, however, that it is his brother who played a part in the fire department of their native city and indeed in the company which guarded the place. The dreamer noticed that he himself was not in uniform although he should have worn one. He is in civilians clothes and thinks: so goes it. Instead of riding breeches (he himself has been mounted in the military) he wears short English breeches. Instead of a saber he carries a somewhat different instrument, a sort of riding-whip which reminds one, however, more of a cow-hide. This he must carry raised in a certain way before him; "so must the saber be carried according to rule" he thought in the dream. With that he hastened in the direction of the burning woods: he passed a house from which dismal cries sounded. There was probably the origin of the fire it seemed to him in the dream.

*(To be continued)*

## ABSTRACTS

### Imago

#### Zeitschrift für Anwendung der Psychoanalyse auf die Geisteswissenschaften

ABSTRACTED BY DR. J. S. VAN TESLAAR  
OF BOSTON, MASS.

(Vol. I, No. I)

1. Development and Outlook of Psychoanalysis. OTTO RANK und  
DR. HANS SACHS.
2. The Savage and the Neurotic. I. The Fear of Incest. PROF. S.  
FREUD.
3. The Meaning of the Griselda Tale. OTTO RANK.
4. The Gift of Story Writing. DR. EDUARD HITSCHMANN.
5. The Application of Psychoanalysis to Pedagogy and Mental Hy-  
giene. PFARRER DR. O. PFISTER.
6. Symbolic Thought in Chemical Research. DR. ALFRED ROBITSEK.

1. *Development and Outlook of Psychoanalysis*.—A well-condensed statement of the origin of psychoanalysis in the clinical observations of Breuer, its development through the genial studies of Breuer's gifted pupil, its development and rapid rise to the rank of a scientific discipline of highest importance as the result of the new stimulus furnished by the epoch making discoveries of Freud.

As a therapeutic measure in the treatment of psychoneuroses, in connection with which it had been discovered, psychoanalysis confined itself at first to problems of individual psychopathology. Soon it became evident that as the mental processes in the individual with which psychoanalysis deals have their counterpart and analogies upon the field of social psychology, the discoveries and inductive observations of psychoanalysis are also applicable in large measure to the problems in the latter field. It was logical therefore that psychoanalysis should gradually extend to problems in mythology, religion, folklore, anthropology, in fact to all problems which present a psychogenetic aspect, no matter what the scientific discipline or category may be to which such problems belong by reason of their content or theme. Towards the investigation of all such problems psy-



choanalysis contributes an empirically established and scientifically proven concept,—the subconscious, and other technical aids the importance of which in the development of all cultural manifestations, such as religion, art, morals, law, it would be difficult to overestimate. The functional rôle of the subconscious as mapped out through the study of psychoneuroses and through the analysis of dreams in individual cases is equally great in all the various ramifications of the collective mind. New proofs are rapidly accumulating of the applicability of psychoanalysis to the study of cultural problems. The various forms of religion, art, morals, myths, laws, which man evolved in the course of his existence from the earliest cave stage to the present level of culture, represent so many means of expressing man's undying wishes and affects. It is the latter that, in the last analysis, furnish the problems of all cultural sciences. The mental aspect of all cultural problems establishes a common, unifying foundation for all sciences, and the mental aspect proper is the direct concern of psychoanalysis, so that the principles and results of the latter, in their turn, are the concern of all other sciences.

Indeed, a genuine psychology that shall investigate the fancies continuously sprouting forth out of the depths of the subconscious and trace them to their proper roots in the life of individual and of race, possessing a technique whereby it is enabled to check up all fluctuations in meaning so as not to become lost in the maze of psychologic details, is bound to open up new problems as well as give new and unexpected solutions to old problems in psychology, including all its various ramifications.

Imago proposes to bring proof that psychoanalysis is already in a fair position to consider the broader problems of social psychology which thus fall within its scope. Incidentally it may be mentioned that the *PSYCHOANALYTIC REVIEW*, as an organ devoted to the understanding of human conduct, also aims to cover, for the benefit of the English scholar and student, the ground which our German confrères have outlined for Imago.

This outline of their program, signed by the two editors, Otto Rank and Hans Sachs, must be pointed out as a model of condensation and temperate statement of a most difficult subject.

2. *The Savage and the Neurotic.* I. *The Fear of Incest.*—Analysis of trustworthy records describing the life and customs of the most primitive Australian races still extant, shows that, far from leading a life of erotic abandon and indiscriminate sexual debauchery, these races are hemmed in and their sexual habits restricted by numerous

customs, proscriptions and taboos. In many respects their sexual life is even more restricted than among people of culture.

In the first place, marriage selection is restricted by the totem,—an animal, more rarely some plant or some natural power,—which stands in a peculiar relation to the whole tribe. The totem is the progenitor of the tribe, its protector, and through the medium of oracles, its chief counsellor in all matters pertaining to the welfare of the tribe. Things pertaining to the totem, or representing it in any way, are not to be used or eaten. Such things are, in a word, taboo. The breaking of this rule is punishable by death.

In this broad custom Freud sees an arbitrary limitation of incest. As the totem is inherited through the female line of descent only, this custom amounts to a protection of the father against the sexual prowess of the son. Members of a totem tribe cannot intermarry. Thus the son, since he belongs to his mother's totem, is excluded from endogamic (intertribal) marriage. But the father and daughter belong to different totems. An intermarriage between them is permissible.

There are other restrictions to marriage, notably through the so-called "phratries" into which members of a tribe are subdivided, so that the chances of a young man's marriage are frequently restricted to a choice from among one twelfth of the number of available women.

Numerous other tribal customs, otherwise perplexing and unexplained, lose their mystery and become clear enough in the light of Freud's theory that these restrictions upon marriage are prompted by the desire to avoid incest,—an infantile impulse which breaks out also in certain neuroses. Thus Freud proves a close genetic correspondence between certain neurotic outbreaks in modern culture and certain taboos relating to marriage among the aborigines of Australia.

3. *The Meaning of the Griselda Tale.*—It is a fundamental discovery of psychoanalytical research that neurotic breakdowns usually occur over family complexes. The application of this concept has been extended so that we are now beginning to appreciate the remarkable fact that family complexes are of capital significance in the elaboration of story, myth and poetic fancies generally.

This paper attempts to show that the *Griselda* story rests on an incest wish phantasy. The complex is traced through the different variants of the *Griselda* story and the various superstructures of detail are examined with reference to the underlying motive they are masking.

A feature constantly recurring in the different versions of the *Griselda* plot but hitherto overlooked by those who have attempted to

explain its origin was found by Rank to indicate its true psychic motivation—yearning for union with the parent.

The different versions of the Griselda plot, from Boccaccio's romance to Hauptmann's drama, represent different conceptions and settings of an incest phantasy.

4. *The Gift of Story Writing*.—Hitschmann records some psychoanalytical observations on a poetic story, the output of a precocious youth. The story, entitled "Schlafst du, Mutter?" by Jakob Wassermann, is largely autobiographic and is concerned largely with the mental life of a nine-year-old boy. In the treatment of his theme the author illustrates very closely the whole of the psychic mechanism which Freud has elsewhere outlined by careful inductive analysis as characteristic of literary talent and dramatic ingenuity generally. The infantile hatred of the father and the strong libido fixed on the mother are clearly portrayed in this child. The thoughts and dreams of the boy are frequently invaded by curiosity about sexual matters. The problem of death, too, becomes characteristically intermingled with the question of the origin of children.

This story and the manner of its treatment presents a strong intuitive verification of Freudian theories on the part of a writer uninfluenced by any psychoanalytical "preconceptions."

5. *The Applications of Psychoanalysis to Pedagogy and Mental Hygiene*.—Pfister selects a number of specific problems and conditions and points out what psychoanalysis may be expected to do in such cases by way of illustrating its applicability to education. In fact, the educational value of psychoanalysis in the training of the young promises to rise to a degree of importance at least equal in importance to its therapeutic value in the management of psychoneuroses.

Among the problems which await psychoanalytic solutions Pfister mentions, the tendency of children to kleptomania, indolence, torture of animals and cruelty generally; antipathy for certain articles of diet. Through psychoanalysis all such peculiarities of conduct may be understood and properly controlled.

6. *Symbolic Thought in Chemical Research*.—Basing his deductions on the autosymbolic phenomenon described by Silberer the author records a remarkable instance to illustrate a similar psychogenetic motivation for scientific discovery.

The instance given is August Kekulé, the chemical investigator. His carbohydrate theory and his theory of benzol structure were conceived during dreams. The dreams are given and analyzed and their relationship traced to the whole of Kekulé's psychic experience. Significant regressions and mnemonic remnants of infantile experiences



are revealed in these dreams of Kekulé, thus showing some internal connection between them and his chemical discoveries.

## Internationale Zeitschrift für Aertzliche Psychoanalyse

ABSTRACTED BY L. E. EMERSON, PH.D.

OF CAMBRIDGE, MASS.

(Vol. 1, No. 2)

1. Some Remarks on the Concept of the Unconscious as Used in Psychoanalysis. SIGMUND FREUD.
2. Stages in the Development of the Sense of Reality. S. FERENCZI.
3. Further Suggestions as to the Technique of Psychoanalysis. SIGMUND FREUD.

1. *The Concept of the Unconscious in Psychoanalysis.*—An idea—or any other psychical element—can be in consciousness at one moment and in the next instant vanish. After a while it may return unchanged. One is forced to assume that it exists in the psyche but is latent to consciousness.

“An unconscious idea is one which we do not note, but whose existence we concede because of other signs and proofs.”

Post-hypnotic suggestion teaches us the importance of the distinction between conscious and unconscious. Such an experiment teaches us still more: We advance from a mere descriptive to a dynamic interpretation of the phenomenon. An idea suggested during hypnosis remains unconscious but at the appropriate moment becomes effective. Thus an idea is at the same time *unconscious* and *real*.

The psychic life of the hysterical patient is filled with real but unconscious thoughts, from which arise all their symptoms. A hysterical woman may vomit because she thinks she is pregnant, without being aware of it. We learn through the analysis of neurotic phenomena that a latent or unconscious thought need not necessarily be weak, and that the existence of such thoughts in the psyche may be established by indirect proof of the most powerful sort. We distinguish between different kinds of latent and unconscious thoughts. We have been accustomed to think that a thought was latent because it was weak, and that as soon as it became strong it entered consciousness. But there are thoughts which cannot penetrate consciousness no matter how powerful they may become. We name the latent thoughts of the first group “fore-conscious,” while the expression “unconscious” is reserved for the second group. The expression

"unconscious" which formerly was used in merely a descriptive sense now has a wider meaning. It denotes, not merely latent thoughts in general, but especially certain thoughts with a definite dynamic character, namely those, which in spite of their intensity and reality are held out of consciousness. Through the differentiation of fore-conscious and unconscious thoughts we abandon the domain of mere classification and give a meaning to the functional and dynamic relations existing in the activity of the psyche. We find an actual fore-consciousness which goes over into consciousness without difficulty, and an actual unconsciousness which remains unconscious and appears to be split off from consciousness. It is not impossible for this unconsciousness to break into consciousness but to do so requires the expenditure of a certain exertion. When we try to study ourselves we find a certain "defense," and when we work with a patient we find a "resistance," which we must overcome. Thus we learn that the unconscious thoughts are kept out of consciousness by a living force, while with fore-conscious thoughts nothing interferes with their entrance into consciousness. The next most probable theory which we can construct, in the present state of our knowledge, is the following. The unconscious is a regular and unavoidable phase in the processes which are at the foundation of our psychical activity. Each psychical act begins as unconscious and can so remain, or so develop that it becomes conscious, according to whether it meets resistance or not. The distinction between fore-conscious and unconscious then is not primary, but depends on the "defense" activity.

But the distinction between fore-conscious and unconscious activity and the knowledge of its separating boundaries is neither the latest nor the most important of the results of psychoanalytic investigations in the psychic life. That is the dream. Psychoanalysis is founded on dream analysis.

A typical case of dream formation may be described in the following manner: A thought process which has retained some of its tendency to activity is beginning to be called up on account of the psychical activity of the day, but escapes notice on account of the general lowering of interest which leads to sleep and forms the psychical preparation for sleeping. During the night this thought process becomes associated with one of the unconscious wishes which are always present in the psychic life of the dreamer, from childhood, but which are usually *repressed* and thus excluded from conscious existence. The thoughts which remain from the day's activity, through the unconscious assistance of this borrowed force, now become active and manifest themselves in consciousness in the form of a dream.

Three things have thus come about: (1) The thoughts have gone through a transformation, disguise, and misrepresentation which is due to their relation to the unconscious. (2) The thoughts, for a time, occupy consciousness which otherwise would not have been accessible to them. (3) A bit of the unconscious, to which this otherwise would have been impossible, thus emerges into consciousness.

That *system*, which manifests itself to us by signs or symptoms, composed of single processes which are unconscious, in lieu of a better name, we call the unconscious. This is the third and most important sense which the expression "unconscious" has gained through psychoanalysis.

2. *Stages in the Development of the Sense of Reality.*—As Freud has shown us, the development of the psychic forms of activity of the individual consists in the gaining of freedom from the originally ruling principle of pleasure and its peculiar mechanism of repression, through the adaptation to reality, that is, through the examination of reality by judgments grounded in objectivity. Thus out of the "primary" psychic stage, as it manifests itself in the psychic process of primitive beings (animals, savages, children) and in primitive mental states (dream, neurosis, plantasy), arises the "secondary" stage of the waking thinking of normal men.

In the beginning of his development the new-born human being seeks satisfaction wholly through energetic wishes (ideas), thereby leaving simply unobserved (repressed) unsatisfactory reality, but failing to satisfy the wish, represents it to himself as present. He can thus satisfy his needs without trouble by positive and negative hallucinations. "At first the absence of the expected satisfaction, the undeceiving, has the result, that he seeks satisfaction through hallucinations. Instead of this the psyche must determine to perceive the real relations of the outer world. Thus is introduced a new principle for psychic activity: no more only what is pleasant gets perceived but also what is real, even if it shall be unpleasant."

Freud, while investigating these problems, has left unanswered the question as to whether the development of the secondary process out of the primary, is gradual or step-wise; whether such development can be known or whether the question is unanswerable. An earlier work of Freud's suggests that the chasm between the pleasure principle and the reality principle may be bridged by the principle of omnipotence. The feeling of omnipotence is a projection of the feeling that certain irresistible impulses must be slavishly followed. From the explanation of the feeling as a symbolic phenomenon the question is raised, where does the child get the assurance to identify thinking



and acting? According to the author it is in the mother's body. Here the embryo lives like a parasite. It has no need that is not satisfied. It has the feeling of being omnipotent, for the feeling of omnipotence is to have everything that is necessary to satisfy any desire: to wish for nothing; to be without need.

This feeling persists after the child is born, but gradually its ego is developed by the experience of the powers of natural forces which *force* themselves on the child. The learning of the powers of nature constitutes the essential content of the development of the ego. In consequence of the unpleasantness of the new environment the first wish of the child can be no other than to get back into its mother's body. This wish is practically realized daily, at first, for from the subjective standpoint of the child he gets everything he wants by crying for it (*period of magic-hallucinatory omnipotence*). The first sleep is nothing else than the successful reproduction of the situation in the mother's body by the shutting out of all possible external stimulation. The next period of the child's life is the *period of omnipotence with the help of magic gestures: i. e.*, when he can get what he wants by reaching for it, and the nurse recognizing his desires, aids him. But with the increase of his desires goes an increase of conditions which must be met and often the outstretched hand must be drawn back empty. Thus he comes gradually to a painful difference in his experience. He must distinguish, from himself, certain malicious things which will not obey his will, as the outer world, *i. e.*, separate the subjective psychical content (feelings) from objective (sensations). The author calls the first of these stages: *Introjection*; the second, *Projection*.

The next stage beyond magic gestures is speech. This is the *period of magic thinking and magic words*. Speech is one of the bodily means used by the child to express its wants. Conscious thinking by means of words is the highest accomplishment of the psychical apparatus. Just as at first the child thought he could get what he wanted by magic gestures so now he thinks he can get his wants supplied by magic words.

Reality has closer relations to the ego than to the sexuality of a person for two reasons, (1) because the sexuality is less dependent on the external world (it can satisfy itself longer through autoerotism), (2) because during the latent period it is suppressed and does not come in contact with reality at all. Autoeroticism and narcissism are the stages of omnipotence in affairs of love. So long as one limits his love to himself he can preserve the illusion of omnipotence in love.

One can suppose that the "wish content" of the neurosis (which

the symptoms represent as fulfilled) depends on the phase of libido development; while the "mechanism" of the neurosis depends on the stage of the ego development. It is even quite easily thinkable that by the regression of the libido to an earlier stage of development the grade of the sense of reality which has been determined by the fixation time, also again comes to life in the mechanism of the symptoms. Since this earlier manner of testing reality is unrecognizable to the actual "I" of the neurotic, it can without further ado also enter into the service of the repression and be turned to the representation of censored feelings and thought complexes. Hysteria and the compulsion neurosis would be characterized, according to this conception, on the one hand through a regression of the libido to an earlier stage of development (auto-erotic, Oedipus complex), on the other hand in its mechanism a reversion of the sense of reality to the stage of magic gestures (conversion) or of magic thoughts (omnipotence of thought).

In general the development of the sense of reality may be represented as a series of repressions, to which men are compelled, not through spontaneous striving for development, but through necessity, through adaptation—demanding refusal. The first great repression comes necessarily through birth, which takes place without active help, without the purpose of the child. The embryo which would much rather remain longer undisturbed in the mother's body is cruelly forced, however, into the world, and must forget (repress) the pleasure-winning ways of satisfying itself and adapt itself to new conditions.

All the things we would have are found in fairy tales. We are in reality weak, but in the fairy tale our heroes are strong and invincible. We are limited in our activities and knowledge through time and space, but in fairy tales one lives forever, and can be in a hundred places at once, see into the future and know the past. Thus the fairy tale, as an art product, brings back to the adult the lost feeling of omnipotence.

3. *Technique of Psychoanalysis*.—Freud takes patients only provisionally for 1–2 weeks to rule out dementia præcox (schizophrenia according to Bleuler, paraphrenia according to Freud).

Too long preliminaries before beginning the real analysis has a bad effect. It gives an opportunity for the Übertragung to develop uncontrolled by the observation of the psychoanalyst.

It is especially difficult if friendly or social relations exist between the physician and the patient or their families.

One must regard the distrust of the patient for the treatment as a symptom, not a reason for giving it up.

Important points to consider are time and money.

Each patient should have a definite hour. It should be daily, with the exception of Sundays and holidays. Light cases, or those from a distance, have three days a week.

The question as to how long the treatment should last is unanswerable. One needs a half or a whole year at least, and therefore one should so inform the patient. A treatment broken off before completed is like a surgical operation unfinished. It is natural to desire to shorten an analytical case, but one cannot get rid of this, that, or the other symptom alone. The neurosis possesses the character of an organism. It must be cured as a whole or not at all. The next thing to consider is the question of money. Money is treated very similarly to sexual things, with most cultured people, with the same disputes, prudery or discrimination, therefore the analyst must treat it with the same sincerity he does things in the sexual life. The wise man does not allow large bills to pile up but sends in a monthly statement. The analyst cannot make even by hard work as much as other medical specialists. Free treatment is not often successful. Many resistances grow out of it. With the young woman it is the *Übertragung*, and with the young man the father-complex which interferes. There are occasionally poor patients who can be benefited.

Freud makes it an absolute rule to have the patient lie down on a lounge. His reasons for this are partly historical, and partly because it is easier for the analyst and partly because it helps minimize some of the resistances, especially those against exposure, and the *Übertragung*.

It is immaterial whether one begins the work with a life history, a history of the illness, or with childhood memories of the patient. One allows the patient to choose the starting point. One says to him, therefore, before I can say anything about you I must know you much better, please tell me all that you know about yourself.

This differs, however, in one essential respect from an ordinary conversation. One says to the patient, while you are seeking different thoughts and memories, you will observe that apparently unimportant thoughts will spring up in your mind, you will say to yourself, this or that does not belong here, or this is quite unimportant, or this is senseless, one does not need to tell that. Do not give in to this critical impulse—*Tell EVERYTHING that goes through your mind*. Regard yourself as a traveller who sits at the window and describe everything you see. Finally, do not forget you have promised with complete candor, and do not hold back anything because it may be unpleasant.



Patients, who reckon their illness from a certain moment, usually start from the moment of their sickness; others, while not understanding the relation of their illness to their childhood often start with a history of their whole life. *One should not expect a systematic recital in any case and should never demand it.* Such part of the history will later have to be gone over anew, and only by this repetition will the additions appear which are so important, and yet are unknown to the patient.

There are patients who carefully prepare their story from the first in order to use the time of treatment to the best advantage. This apparent zeal is really resistance. One dissuades the patient from such preparation which is only for the purpose of preventing the exposure of unwished facts. If the patient is sincere in his praiseworthy desire, the resistance will take its share of the intentional preparation and the most valuable material will be concealed. One will soon notice that the patient finds still other methods to avoid a long treatment. He will talk over the case with an intimate friend and tell him all the thoughts he ought to tell the doctor. The case thus has a leak through which the best runs off. One will soon come to the time then when he will advise the patient that the relation is to be only between the patient and his doctor and that all other persons are to be excluded. At later stages of the treatment, as a usual thing, the patient does not seek such confidants.

Patients who wish to keep their treatment secret because their neurosis is a secret, are not hindered. It is on this account that some of the most beautiful cases can not be known. The reason of the patient for his secret is obviously a revelation of his secret history. If one enjoins the patient at the beginning not to make a confidant of any other person he at the same time safeguards himself against many antagonizing influences. Such influences, at the beginning of a case, may be fatal.

If during the analysis it is necessary to resort to internal or other special therapy, it is best to call in a non-analytic colleague. Combination treatment of a patient with a given organic trouble is in most cases impossible.

One will occasionally meet with patients who begin the treatment with the assertion that nothing enters their mind that they can tell, although their whole life and the history of their sickness lies clearly before them. This is a strong resistance, raised to protect the neurosis. The energetic and repeated assurance that there cannot fail to be thoughts and memories of the beginning of their trouble, and that what interferes is only a resistance against the treatment,

forces the patient finally to a confession, or discovers a part of their complex. Women, whose history contains a sexual aggression, men, with an excessively repressed homosexuality, will preface the analysis with such denials of thoughts.

Like the first resistance, the first symptoms or chance acts of the patient claim an especial interest, and betray a ruling complex of the neurosis. A brilliant young philosopher, with exquisite esthetic ideas, hurried to pull his belt right before lying down. He proved to be a "koprophile." A young woman, in the same situation, drew her dress hastily over her exposed ankles. She thus betrayed, what the analysis later proved, her narcissistic pride of her bodily beauty and her inclination towards exhibitionism.

As long as the ideas and expressing them goes along unhindered, one leaves the question of the *Übertragung* alone. One delays handling this most delicate of all procedures until it has become a resistance.

The next question is a principle. When shall we begin to communicate the meaning of the analysis? When is it time to tell of the secret meaning of his ideas, to introduce the patient to the presuppositions and the technical procedure of the analysis? The answer can only come: only when there has been established a rapport, or *Übertragung*. One must condemn the procedure which communicates the translation of his symptoms to the patient as soon as known, or for the sake of a certain triumph, throws the "solution" in his face at the first meeting. It will not be hard for a practical psychoanalyst to perceive clearly from the patient's complaint and his account of his sickness, the concealed wishes. But what a measure of self-conceit and inconsiderateness will be his if after the shortest acquaintance, he discloses to a stranger unfamiliar with psychoanalytic presuppositions, that he clings incestuously to his mother; that he harbors death-wishes against his wife; that he designs to betray his chief, etc. In later stages of the treatment it will be wise to communicate the meaning of his symptoms to the patient just before he is ready to see it himself, so that he has only to take a short step to understand it. It has been often noted that a premature disclosure resulted in a premature end of the treatment, as much on account of the resistances raised as on account of the relief experienced. One will make an objection here: It is then our task to prolong the treatment, and not rather to bring it as quickly as possible to an end? Does not the patient suffer on account of not knowing and not understanding, and is it not a duty to instruct him as soon as the doctor himself knows? The answer to this question leads to a short digression on the mean-

ing of knowing and the mechanism of the curative effect of psychoanalysis.

In the beginning of psychoanalytic technique we put the highest value on intellectualistic thought dissociation and scarcely distinguished between the patient's knowing and our knowing. We thought it especially lucky if we could get information from outside sources, *i. e.*, from parents, servants, or the seducer himself, and hurried to tell the patient the news in the sure expectation of thus bringing the neurosis and the treatment to a speedy end. It was very disappointing when the expected result did not come. Not once did the memory of the repressed trauma emerge as a result of the communication and description of it. One must lay the emphasis on the resistance and seek to overcome it.

The strange behavior of a patient which includes a conscious knowing with not-knowing, remains for so-called normal psychology obscure. Psychoanalysis gets over it with no difficulty because it recognizes the unconscious. The described phenomena however are the best known proofs of the conception that psychical processes are topically differentiated. The patient knows only of the repressed experience in his conscious thinking, but this fails to connect it with that place in which, in some way or other, the repressed memory is contained. A change can only take place if the conscious thought process is brought to this place and overcomes the repression resistance. The reason the conscious communication of the repression avails nothing is because it provides no opportunity for the expression of the wished-for action, which would end the symptoms, but becomes itself a resistance.

The Übertragung alone can remove symptoms, but that is no psychoanalysis. The treatment deserves this name only when the Übertragung is used as one means of overcoming the resistance.

### Zentralblatt für Psychoanalyse

ABSTRACTED BY C. R. PAYNE, OF WADHAMS, N. Y.

(Vol. 2, No. 4)

1. The Dynamics of the "Transference." PROF. SIGMUND FREUD.
2. Homosexuality and Paranoia. PROF. R. MORICHAU BEAUCHANT.
3. From the Categories of Symbolism. HERBERT SILBERER.
4. Utilization of Headache as a Sexual Symbol. J. SADGER.

1. *Dynamics of Transference.*—Freud discusses the play of mental



forces which bring about the phenomenon of "transference" in the psycho-analytic treatment, taking up such points as whence the phenomenon arises, why it is greater in neurotics, why it causes the greatest "resistances" in the treatment, why it is an indispensable part of every such treatment, at the same time calling attention to the fact that there may be negative as well as positive transference and that toward the same person (ambivalence).

2. *Homosexuality and Paranoia*.—Beauchant reports the case of a man of forty-seven, married, with three children, a teacher by profession, of blameless habits and strongly religious, who developed typical paranoiac delusions. The history which the patient gave clearly showed the homosexual tendency breaking through the repression in the form of self-reproaches which had been projected onto others. The report is only given in outline as confirming Freud's and Ferenczi's work on the same subject.

3. *Headache and Sexual Symbolism*.—Sadger points out that many headaches of purely functional nature when found in hysterics or other psychoneurotics can be proved to be of psychogenic origin. He cites several interesting cases from his own observation to substantiate his opinion and shows how different types of headache often give symbolic expression to sexual repressions of childhood. He also refers to the quite general use of the head as a sexual symbol both among healthy and neurotic individuals.

(Vol. 2, No. 5)

1. Unconscious Manipulation of Numbers. ERNEST JONES.
2. The Relations of the Neurotic to "Time." WILHELM STEKEL.
3. Introjection, Projection and Sympathy. SANDOR KOVACS.

1. *Unconscious Manipulation of Numbers*.—Jones calls attention to the fact that numbers as well as words and ideas are subject to unconscious manipulation. He illustrates his point by quoting from the analysis of a case of obsessional neurosis in a man of twenty-four and shows clearly how certain numbers and plays on these numbers, additions, subtractions, inversions, etc., were utilized to symbolize the mother-complex from which the patient suffered. He points out that the mechanisms of this process are very similar to those which Freud has proved characteristic of dream formation.

2. *Relations of the Neurotic to "Time"*.—In a very interesting little article, Stekel sketches the curious but characteristic ways in which the neurotic treats time and its problems. He says that in the neurosis the mental boundary land where fact and fancy meet is

greatly enlarged, *i. e.*, conscious reality and unconscious phantasy merge much more completely and extensively than in health. The neurotic finds himself impelled to stay in the land of fancy, oblivious of time and its effects. For the unconscious there is no time and when reality refuses the longed-for things, the neurotic flies to the land of phantasy for consolation. The extreme of this is the psychosis. Stekel makes this plain by citing numerous apt illustrations from his practice mostly from the realm of the obsessions. Besides the tendency to annul time, to wish that he were back in those happy days, the neurotic plays with time in other ways; he is much concerned with the flight of time, with the problem of age and the relative ages of himself and his parents, thoughts of death, etc.

3. *Introjection, Projection and Sympathy.*—This article is continued into the next number of the *Zentralblatt* and will be abstracted with that number.

(Vol. 2, No. 6)

1. Neurotic Maladies Classified According to the Conditions which Cause the Outbreak. PROF. SIGMUND FREUD.
2. Psycho-Analytic Investigation and Treatment of Manic-Depressive Insanity and Allied Conditions. DR. KARL ABRAHAM.
3. Introjection, Projection and (Esthetic) Sympathy. DR. SANDOR KOVACS.

1. *Neurotic Maladies.*—Freud discusses the conditions influential in causing the outbreak of a neurosis in a predisposed person and finds it convenient from a practical standpoint to divide these into four classes or types:

1. When external conditions constitute a denial of the gratification of the "libido." "The individual was healthy so long as his need of love was gratified by a real object in the external world; the neurosis appears as soon as this object is withdrawn without the finding of a substitute." This type is especially concerned with the subject of abstinence.

2. The second type is less obvious to superficial examination but is revealed by a study of the complexes after the manner of the Zurich School. In this type, the pathological agency is not in the denials of the external world but in the inability of the individual to adapt himself to external conditions; in the course of development the libido has become fixed upon some object from which the person is unable to free it and direct it toward the normal object of real life. Hence the neurosis comes about as a result of this failure to adapt to reality. We may say that the first type is characterized by a dam-

ming up of libido from external causes (no outlet provided), the second type by a damming up of libido from internal causes (fixation upon some object in early life from which it cannot be freed by the individual unaided).

3. The third type, Freud calls an exaggeration of the second, an inhibition of development. The libido has never left the infantile fixations; the individual falls ill as soon as the irresponsible period of childhood is past and never attains a phase of complete health, *i. e.*, unhampered power to act and enjoy.

4. The fourth type has to do with what may be termed a quantitative change in the libido; at certain periods, as puberty and the menopause, biological processes of which we know little, there occurs an increase in the libido which finds the ordinary means of gratification relatively inadequate to carry it off, resulting in many of the same neurotic conditions which the absolute inadequacy of Type 1 showed.

Freud says that these four types have no great theoretical value, but that they show different ways of origin of a certain pathological constellation in the mental household, namely, the damming up of libido against which the ego cannot guard itself without injury.

2. *Manic-Depressive Insanity*.—Abraham presents six cases of manic-depressive insanity and closely related depressive conditions which he has treated by psycho-analysis. Two of these were light manic-depressive insanity (cyclothymia), a third, a periodic depressive condition with typical melancholic phenomena, two others, early depressive psychoses and the sixth, a severe, persistent depressive psychosis in a man of forty-five.

Because of the duty of discretion, Abraham is able to publish in detail only one of the analyses and this is compressed into small space. This case was one of the cyclothymics, a man in the thirties who had suffered at first from periodical depressions dating back to his school years to which had been added from his twenty-eighth year on, a manic phase. These phases alternated. Only a few of the points brought out can be mentioned here. Prominent among these are a precocious and intense development of the sexual life followed by onanism, a turning away from reality and excessive repression. Home life was unpleasant and his relations with father and brothers unfriendly. Especially clearly presented is the patient's relation to the love-hate constellation and the powerful effect which this had on his mental development. The similarity between this psychosis and the obsessional neurosis is pointed out; also certain paranoic features such as projection. The repression of the sadistic component of the



sexual instinct is shown to have been very influential. The "fear of poverty" complex is also well worked out and its relation to the identification of libido and money emphasized. Another interesting feature is the exposition of the fact that both phases of the malady could arise from the same complexes: in one phase (depressive) the patient is overcome, inhibited by his complexes; in the other (manic) he seeks to free himself from the complexes, to ignore them as it were. Abraham touches on the question of why the manic attacks did not appear until the patient was twenty-eight years old and believes that it was because of a delayed psychosexual puberty. The therapeutic results in this case were excellent. Not only was the patient freed from his inhibitions and suffering but rendered capable of regular work.

The other cases are only reported in outline. The other cyclothymic was not analyzed far enough for therapeutic results but showed a similar mental mechanism to number one. The third case (melancholic depression) was much improved, although the analysis was interrupted by external conditions before it was completed. Cases four and five could not be analyzed because of external difficulties but showed that they were favorably influenced by the short period of analysis. Case six ended, as Abraham expresses it, in "an extraordinarily beautiful result." Complete cure after six months treatment. Unfortunately, because of the duty to the patient, this analysis could not be published.

This article is very suggestive of future results and justifies Abraham's concluding remark that "psycho-analysis seems about to free psychiatry from the nightmare of therapeutic nihilism."

3. *Introjection, Projection and (Esthetic) Sympathy.*—In an interesting article of philosophical nature, Kovacs seeks to elucidate the psychological processes involved in the phenomena of esthetic sympathy, *i. e.*, the emotions aroused in a person gazing on a picture, listening to music, reading poetry, looking at a statue or building, etc., and also emotions in the minds of the creators of these objects (painters, composers, poets, sculptors, architects). He finds that the former process is closely related if not almost identical with the mechanism which Ferenczi has described as "introjection"; the onlooker, listener, reader, etc., identifies himself with the object of his attention and seeks to feel what the object (picture, music, poem) portrays. This process is best illustrated by an example from the field of mental pathology, namely, in the hysteric who seeks to bring all possible objects into relation to the ego-complex. The second process, the attempt of the artist to embody in his creation his own emotions, is

akin to the mechanism described by Freud as "projection"; again an example from psychopathology makes this clearer: the paranoid attempts to attribute to others ideas which have originated in his own mind. Thus we may say the mental processes of the paranoid and artist have much in common, both seek to create in the external world ideas or emotions which had their origin in their own minds. The hysteric introjects, the paranoid projects. The public introjects, the artist projects.

The author brings up the interesting question of how far these two traits may be mingled in one personality and what the results of this would be. Without answering this in detail, he calls attention to the fact that artists are usually people of strong individuality who are much better at creating works of art than at appreciating the art of others. A further analogy to these two processes is pointed out in the sexuality of man and woman: man projects, creates, is active; woman introjects, conceives, is passive.

(Vol. 2, No. 7)

1. Masks of Homosexuality. WILHELM STEKEL.
2. Folk-Psychological Parallels to Infantile Sexual Theories. OTTO RANK.
3. Investigations in Lecanomania. HERBERT SILBERER.

1. *Masks of Homosexuality*.—"The deeper we penetrate into the mental mechanisms of the neuroses and psychoses, the more important appears the activity of homosexual instinctive forces. The differences between the results of psychoanalytic investigation and the customary anamnesis nowhere show so plainly as in the statements of the neurotic concerning homosexuality. No other component of the sexual instinct admits of so much repression and becomes so foreign to consciousness." Following this introductory statement, Stekel proceeds to point out some of the most frequent masks which cover repressed homosexual tendencies. All neurotic symptoms are the results of a compromise and conceal on one side as much as they reveal on the other. The homosexualist would unite in one object as many as possible of his instinctive tendencies. His ideal would be a being which is at once man, woman and child (and perhaps animal and angel). Thus, male homosexualists seek women with certain masculine attributes such as large stature, flat breasts, coarse features, deep voice, etc., while female homosexualists seek men with feminine attributes. The same applies to mental characteristics, as women who are aggressive, athletic and of masculine temperament and the opposite feminine traits in effeminate men.

Less obvious is the inclination of certain men toward old women because age tends to develop a more masculine appearance. Pathological jealousy also betrays strong homosexuality. One party is jealous because he or she has an unconscious love for the disturbing person. Another homosexual type is the person who is always seeking an ideal (person) which is never found because of bisexual traits demanded.

Certain external signs betray strong homosexual tendencies as men who suddenly go in for sport, pugilism, sun-baths, etc., in order to see unclothed men. Similarly, women sometimes have their hair cut short, wear military coats and hats and go in for women's rights in order to give vent to their homosexual tendencies, *i. e.*, play the man and love a woman. Other signs are the adoption of a masculine pseudonym by a woman, the marriage of a man to a woman because he is in love with her brother, the preference of an artist for masculine figures, etc., etc.

2. *Folk-Psychology and Infantile Sexual Theories*.—The author shows that many of the infantile sexual theories which Freud has pointed out as typical products of childish mental life while the child is still ignorant of the true facts of birth and impregnation, can also be found in legends, myths and saga of primitive peoples of various races. In other words, the childhood of the race produced many of the same phantasies which psycho-analysis has revealed in the childhood of the individual. Rank illustrates his point with a wealth of material taken from the most diverse sources (Hebrew, Egyptian, Greek, Indian, Mexican, etc.).

3. *Lecanomancy*.—This article runs through four numbers of the *Zentralblatt* and will be abstracted when concluded.

(Vol. 2, No. 8)

1. A Complicated Ceremonial of Neurotic Women. DR. KARL ABRAHAM.
2. Folk-Psychological Parallels to Infantile Sexual Theories. OTTO RANK.
3. Lecanomantic Investigation (Continuation). HERBERT SILBERER.

1. *Complicated Ceremonial of Neurotic Women*.—Abraham reports a curious ceremonial of obsessive character carried out by two different women among his patients. This consisted of having everything about their persons and night clothing painfully neat and orderly when they retired for the night, the hair neatly arranged, etc. The reason which the patients gave for carrying out this ceremonial was that they might die suddenly in the night. The analyses revealed



deeper unconscious motives in repressed incestuous wishes toward the fathers.

2. *Folk-Psychology and Infantile Sexual Theories*.—This is the conclusion of an article reviewed in the previous number; it gives many more examples.

3. *Lecomany* (continued).

(Vol. 2, No. 9)

1. Suggestions to the Physician Practicing Psycho-Analysis. SIG. FREUD.

2. Illustrated Dreams. DR. MARCINOWSKI.

3. Lecanomantic Investigation. (Continuation.) HERBERT SILBERER.

1. *Suggestions to Physicians*.—Freud presents here for the benefit of those practicing psycho-analysis some of the technical rules which he has developed in his own practice:

(a) For keeping clearly in mind the countless details of names, dates, associations, etc., which the patients present daily, he recommends that the physician refrain from trying to look for anything in particular and from focusing his attention upon any particular point and devote a calm, uniform, unforced attention to all that is said. In this way, the physician saves himself much fatigue and is in a better position to notice the important points in the patient's associations.

(b) As a general rule, it is not wise to make notes during the consultation, because it acts as an inhibition upon the patient's associations and distracts the physician's attention. An exception to this rule may be made in case of dates, bits of dreams or the like. Freud says, however, that he is accustomed not to do this, but to make all his notes in the evening after the day's work is over.

(c) The demand for exact scientific case records should not be allowed to cause the physician to violate rule *b*. The notes made afterwards are exact enough for all practical purposes and much more advantageous to the treatment.

(d) Although the analysis affords opportunity for both investigation and treatment, it is never good for the therapeutic outcome to direct the analysis with the end of investigation in view. The analysis should be allowed to take the direction which the material indicates and only after the treatment is ended should the physician allow himself to reconstruct and consider the case from the purely scientific standpoint.

(e) The psycho-analyst should follow the example of the surgeon

by freeing himself as completely as possible from emotional interest in the case, thus giving his intellectual powers full play.

(f) Just as the physician demands of the patient that he let his associations flow freely without any guidance or critique so the physician himself must receive the material presented without criticism on his part. In other words, he must know his own complexes so that he will be in position to listen to everything in an unbiased manner. To attain this end, it is almost imperative that every physician who intends really practicing psycho-analysis should submit to an analysis himself that he may be aware of his own unconscious forces. The physician after once having this outside help can keep track of his own complexes by analyzing his own dreams.

(g) The physician must not allow the patient to gain an intimate knowledge of his own life, since this may lead to suggestion and render difficult the freeing of the transference. As Freud aptly puts it: "The physician should be intransparent to the one being analyzed and like a mirror show only what is shown to him."

(h) In the matter of educating the patient and urging him to sublimate his instinctive forces, the physician must be on his guard. He may easily urge the patient to attempt more in the way of sublimation than his constitution will permit.

(i) As to how much the patient may aid the treatment by intellectual effort, no general rule can be laid down. The personality must decide. Urging the patient to concentrate his memory on certain periods of his life does not help much. Reading of psycho-analytic articles is also not to be recommended. Rather, the patient should be taught to learn from his own case and give his associations free play. Freud further warns strongly against courting the support and agreement of parents and relatives by giving them articles on psycho-analysis to read.

2. *Illustrated Dreams*.—This is a contribution to the subject of dream interpretation with especial reference to certain dreams which patients bring accompanied by drawings or sketches.

## BOOK REVIEWS

PÄDAGOGIUM. Eine Methode-Sammlung für Erziehung und Unterricht Unter Mitwirkung von Prof. Dr. E. Meumann, Herausgegeben von Prof. Dr. Oskar Messmer. Band I. Die Psychoanalytische Methode Eine erfahrungswissenschaftlich-systematische Darstellung, Von Dr. O. Pfister, Pfarrer und Seminarlehrer in Zurich, mit Geleitwort von Prof. Dr. S. Freud. 1913. Verlag von Julius Klinkhardt, Leipzig und Berlin.

Since psychoanalysis deals with the deeper strata of mental life and the exploration of infantile and child life for the purpose of determining the genesis of psychic manifestations, the intimate relationship between pedagogy and psychoanalysis is quite apparent. It was conclusively demonstrated what an immense value Freud's psychology had in understanding the human mind in all its phases and not only in the *abnormal* but in the *normal*. In early childhood, deviations in mental life may frequently occur, hence early corrections and direction of normal habits are extremely important in order to prevent the approach of a neurosis or a psychosis in adolescence or adult life. The more one examines abnormal mental states, the more he is convinced that a great deal could have been accomplished in the line of prevention for our patients if their early childhood could have been properly adjusted. It will not be far-fetched to state that psychoanalytic pedagogy is the foundation of the prophylaxis of nervous and mental diseases.

According to Freud, the difference between the physician and the pedagogue lies in the fact that the former deals with fixed psychic formations and attempts to give to the patient insight of his own limitations and creates a surety for his independence, whereas the pedagogue works with plastic and impressionable material and directs the child, not according to his personal ideals, but moulds him "according to the object of fixed dispositions and possibilities."

The profound value of Pfister's book lies in the fact that it is based upon material gathered from school room and confessionals, and its results are utilized for educational and prophylactic purposes. While a few criticisms may be made to the effect that the case records are a bit too superficial and lack the completeness of medical polish, nevertheless the whole issue is strikingly well and lucidly outlined. To the medical man this book conveys a systematic psycho-philosophical pre-



sensation of psychoanalysis, and to the psychologist, pedagogue, minister, etc., Pfister's thesis represents a new psychology of which they were deprived in their professional curriculum.

Before delineating the general scope of this book a few facts must be accentuated:

1. Emotions play an important rôle in the mechanics of psychic and neurotic symptoms.

2. The significance of the *unconscious* in the determination and interpretation of the abnormal mental phenomena.

3. Sexual life in the light of modern research implies rather a wide scope and exerts a definite dynamic influence upon one's mental life.

4. The mechanisms of repressions and their respective compensatory reactions are of infinite aid in the study of various mental reaction types.

The book begins with a brief outline of the conception and history of psychoanalysis and gradually the author enters upon the discussion of the unconscious the various theories of which are treated in an interesting and entertaining manner. He ascribes to the unconscious "the moulding and creative potency" and characterizes it in the following manner:

"By the 'unconscious' or 'subliminal' we name the intellectual and emotional processes which manifest themselves outside of the conscious which in accordance with the law of causal connections we believe to come from the physical and psychic manifestations." An anatomical localization in the sense of Grasset or Janet he cannot admit.

Following this he devotes his attention to the study of repression and fixation, and finally takes up the sexual theory which he does not accept in all its phases. For instance he does not agree with Freud that the mouth, intestinal canal and eye are erotogenic zones, although he admits that he has seen cases in which these organs served a sexual end. By libido he means that which is "in the activity of the impulse and volition life forces and the desire to live become manifest." "By sexuality we understand the sum total of those physical and psychic manifestations which are related to reproductive instinct or organs. From it we differentiate erotic, which we place in the same category with love, and likewise regard it as sexual and as for our conscious it may be looked upon as not sexual."

From here he follows his trend of thought to dreams, symbolism, the study of complexes, etc., and finally introduces the subject of the relation of psychoanalysis to pedagogy and emphasizes the importance of the former in the bringing up and education of the child. He

refers to numerous valuable cases which demonstrate the mechanics of certain neurotic and psychic manifestations.

The concluding chapter deals with the results of psychoanalysis from the pedagogic point of view. He discusses the relation of the child to the parent and to his brothers and sisters; the position of the educator; sexual education; and religious bringing up.

It is impossible to review the enormous material of this valuable book, and the reader is advised particularly to pay attention to the following topics which are extremely well treated: Dreams; symbolism; regression; sexual theory; the unconscious; and the whole chapter dealing with psychoanalysis in relation to pedagogy.

Pfister is to be congratulated for the excellently clear presentation of this difficult subject, and indeed it is an invaluable acquisition to the psychology of these recent days. It is to be hoped that the book will soon be translated into English.

KARPAS.

Notice.—All manuscripts should be sent to Dr. William A. White, Government Hospital for the Insane, Washington, D. C..

All business communications should be addressed to The Psychoanalytic Review, 64 West 56th Street, New York, N. Y.

# THE PSYCHOANALYTIC REVIEW

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## ORIGINAL ARTICLES

### MOON MYTH IN MEDICINE<sup>1</sup>

#### THE MOON AS LIBIDO SYMBOL

BY WILLIAM A. WHITE

If the average man of today were questioned about the mythology of the moon his mind might revert to the beautiful Greek story of Selene, the moon goddess pausing in her nightly course across the heavens to stoop and kiss sleeping Endymion, the setting sun. This would very likely be about the extent of his information, and his idea of both the imminence and the importance of moon myth would be correctly inferred from such an example—moon myths belong to the period of the pretty stories of Greek mythology.

A little effort, however, addressed to discovering the extent and importance of moon myth would soon serve to disclose the fact that the moon has been of the very greatest importance in the thinking of all peoples from long before the dawn of history. Not only the Greeks had their moon goddess, but so did the Egyptians; the Chaldeans were moon worshipers; the Phœnician "queen of heaven," Astarte or Ashtaroth, was a moon goddess; the Romans had Luna, and only recently we see a dispute over the interpretation of certain inscriptions on clay tablets of the time of Hammurabi (2250 B. C.) and his father. The noted Assyri-

<sup>1</sup> Read at a joint meeting of the Medical History Club of Washington, D. C., and the Medical Society of the District of Columbia, April 29, 1914.



ologist, Prof. Delitzsch, in his book<sup>2</sup> "Babel and Bible" has read upon them "Yahveh is God," while Chamberlain, the accomplished author of "The Foundations of the Nineteenth Century," insists that the correct reading is "The Moon is God."

In addition to such facts as these he would learn that the savages all regard the moon with superstitious awe and that there was even a sect of early Christians—fourth century—who worshipped it in the person of the Virgin.<sup>3</sup>

Such worship of the moon was in no wise merely an indulgence in pretty fancies. The wise Socrates said at his trial "You strange man, Meletus, are you seriously affirming that I do not think Helios and Selene to be gods, as the rest of mankind think?" while Anaxagoras was sentenced to death<sup>4</sup> and afterwards banished for calling the moon a lump of lifeless matter.

Such deep-seated beliefs must have carried forward their effects into later generations and it will take only a little hunting to find them. Blackstone defines a person who is non compos mentis to be one "who has had understanding, but by disease, grief, or other accident, has lost the use of his reason, but that a lunatic is indeed properly one who hath lucid intervals, sometimes enjoying his senses, and sometimes not, and that frequently depending upon the change of the moon."

And finally, its very stronghold is found to be the nursery, for what child is not religiously taught the story of Jack and Jill. The fall of Jack and the "tumbling after" of Jill are but the successive disappearance of the moon spots as the moon wanes.<sup>5</sup> But the names have a deeper significance. The name Jack is derived from a verb meaning "to increase," and Jill from a verb meaning "to break up or dissolve," so Jack and Jill are nothing more than personifications of the waxing and waning, and the water they went after is an indication of the dependence of the weather, in particular the rainfall, upon the moon.

The prevalence of moon myth is thus seen to far exceed

<sup>2</sup> The Open Court Pub. Co., Chicago, 1906.

<sup>3</sup> Cited by T. W. Slaughter, "The Moon in Childhood and Folklore," *Am. Jour. Psych.*, April, 1902.

<sup>4</sup> Cited by Edward Clodd, "The Birth and Growth of Myth," The Humboldt Library of Science, New York, 1884.

<sup>5</sup> Baring Gould, "Curious Myths of the Middle Ages."

what might have been our expectations. We will not therefore be surprised when we find that from the earliest days it has been believed to be responsible for very important effects both in the production and the modification of disease, both bodily and mental.

The Greeks believed the moon influenced childbearing;<sup>6</sup> Aristotle believed in the influence of the moon on the body,<sup>7</sup> and Galen asserted<sup>8</sup> that animals born when the moon was falciform or at the half quarter are weak, feeble and short lived, whereas those that are born at the full of the moon are healthy, vigorous and long lived. The Spartans believed<sup>9</sup> in the influence of the moon on life, while Hippocrates recommended<sup>10</sup> that no physician be intrusted with the treatment of disease who was ignorant of the science of astronomy. Lord Bacon was convinced of the moon's influence on the body, and it was recorded<sup>11</sup> that he had a severe syncope whenever it was eclipsed, and Van Helmont<sup>12</sup> thought wounds inflicted during periods of moon-light most difficult to heal.

During all this time innumerable treatises, books, papers in medical journals, etc., appeared bearing upon this subject. A doctor Mead,<sup>13</sup> writing shortly after Newton, endeavored to demonstrate the influence of the sun and moon on the body ("De Imperio Solis et Lunæ in corpora humana et Morbis, inde oriundis"). Dr. Balfour<sup>14</sup> wrote to the same effect ("Treatise on the Influence of the Moon in Fevers," 1784 and "Treatise on Putrid Intestinal Remitting Fevers," 1790).

In the field of mental disease the literature is quite as rich. Daquin,<sup>15</sup> an eminent French psychiatrist, said ("Philosophie de la Folie," 1791): "It is a well-established fact that insanity is a disease of the mind upon which the moon exercises an unquestionable influence," while Guislain<sup>16</sup> ("Leçons Orales sur les Phrénopathies," 1852) reports a patient who became maniacal every twenty-eight days, the attacks returning with the full of the moon.

<sup>6</sup> Cited by Forbes Winslow, "Light: Its Influence on Life and Health," London, 1867.

<sup>7</sup> Winslow, *l. c.*

<sup>8</sup> Winslow, *l. c.*

<sup>9</sup> Winslow, *l. c.*

<sup>10</sup> Winslow, *l. c.*

<sup>11</sup> Winslow, *l. c.*

<sup>12</sup> Winslow, *l. c.*

<sup>13</sup> Winslow, *l. c.*

<sup>14</sup> Winslow, *l. c.*

<sup>15</sup> Winslow, *l. c.*

<sup>16</sup> Winslow, *l. c.*

References to these conceptions are frequent in literature. Shakespeare, in *Antony and Cleopatra*, makes Enobarbus speak of the moon as "sovereign mistress of true melancholy," and Othello, when he hears of the murder of Roderigo, exclaims:

"It is the very error of the moon,  
She comes more near the earth than she was wont,  
And makes men mad."

Milton, in *Paradise Lost*, referring to the effects of the moon, speaks of

"Demonic frenzy, moping melancholy,  
And moon-struck madness."

These illustrations are sufficient to show, not only the wide prevalence of the belief that the moon exercised a most important influence on man, but something of the character of that influence. It remains to see if we can throw light upon the explanation for such beliefs.

The approach to no scientific coast is fraught with more danger or littered with the wreckage of more flimsily constructed theories, as well as carefully planned expeditions, than that of comparative mythology. The adventurous mariner upon the high seas of scientific speculation has been lured upon the rocks time after time by some fair Lorelei of his imagination when he has abandoned the course laid down upon the chart by rigid scientific calculations. The way is full of dangers, the coast is rock bound, and there seems to be no opening in the white line of breakers. Yet each generation brings new energy and new faith to the quest, and the present is no exception.

I have indulged in these few side remarks because I wish the difficulties and dangers surrounding any effort to interpret matters mythological to be appreciated and to prepare the reader for an interpretation that may fall short of his expectations.

Failure in the past has been largely due to the mental attitude of the investigator who has been too prone to find explanations that satisfied his own standards of reasons, forgetting or failing to see that myths reach back into a remote antiquity, that they were born in the mind of primitive man, and that the ways of thinking of primitive man are not our ways. This failure to ap-



preciate the ways of thinking of primitive man is comparable to the very widespread attitude at present maintained toward the child. Many, perhaps most people regard the child simply as a small adult. Nothing could be further from the truth. The child and primitive man live in a world very different from the world you and I live in and if we fail to understand this at the outset we will fail to understand altogether the products of primitive, child-like minds.

I have said that all sorts of theories have gone down to destruction in an effort to effect a landing on the coast of comparative mythology. For a long time almost everything was conceived of as some variant of a solar myth—every straight line was a ray of the sun. Then there came the phallic theories, and the myths were loaded with all sorts of sexual significance, and the straight lines now received a phallic interpretation. Now we see that both the sun's rays and the phallus are expressions of an underlying unity.

As the energetic concept, which for so long has done service in the physical sciences, has been transferred to the mental realm we have come to conceive of the psyche as a manifestation of the great creative energy inherent in all life—an energy always stressed with possibilities for upward progress, always struggling, as Bergson would put it, to free itself from the restraints of matter—to become more and more spiritualized—in response to the all-pervading *poussée vitale*. If you will bear this energetic conception in mind it will help us in our efforts at interpretation.

Starting then with this energetic conception I will call the energy *libido*. If you think I am perhaps arbitrary in doing this I will only say that it would be quite impossible to defend these positions in detail in the limited space of such a paper as this. The first proposition that follows from these assumptions is that the moon is a *libido* symbol. Let me elaborate this a little to the end of clearness.

The moon could hardly escape the observation of any one not blind. It is such a prominent feature of the heavens. Mankind must therefore, everywhere, have had their attention attracted towards it and given it no little interest. To attend to an object, to be interested in it, and to think about it means that we are expending our energies upon it; we are giving of ourselves, so much

as is represented by our interest, to that object. That which we give is our libido, and so the object must stand for our libido or at least that part of our libido represented by the specific interest we have in it.

The moon then being a libido symbol we should expect to find a certain type of phenomena would naturally result. Let us see if that is the case.

A libido symbol is above all a symbol of energy. The moon then is first of all concentrated energy. Energy, however, is an abstract conception; it is either good or bad according to the ends to which it is directed. If we think of electricity as a concrete example we know it may be used to do constructive work, as in running a mill, or it may be destructive as in the lightning strokes. We should expect to find these two opposite kinds of effects, constructive and destructive, in man's thinking about the moon. Do we?

Diana,<sup>17</sup> in her capacity as moon goddess, was worshiped as the goddess of fertility. She bestowed offspring, 'women in travail prayed to her, and she provided goodly crops for the farmers. Among the tribes of Geelvink Bay,<sup>18</sup> in northwestern New Guinea, when the men are gone on a long journey the wives and sisters who remain at home sing to the moon and if its silver sickle is seen in the sky they raise a cry of joy. "Now we see the moon and so do our husbands, and now we know that they are well; if we did not sing, they would be sick or some other misfortune would befall them." The bad influences of the moon are especially frequent. Celsus was gravely suspicious<sup>19</sup> of injuries likely to arise from injudicious exposure to the influence of the moon, especially before its conjunction with the sun. In Iceland it is said<sup>20</sup> that "if a pregnant woman sit with her face turned toward the moon, her child will be a lunatic" ("Legends of Iceland," collected by Jón Arnason, 1866). Jerome says:<sup>21</sup> "Lunatics were not really smitten by the moon, but were believed to be so, through the subtlety of the demons, who by observing the

<sup>17</sup> T. G. Frazer, "The Golden Bough," 3d ed., Part I, "The Magic Art and the Evolution of Kings," Vol. II, p. 128.

<sup>18</sup> Frazer, "The Magic Art," Vol. I., p. 125.

<sup>19</sup> Winslow, *l. c.*

<sup>20</sup> Cited by Rev. Timothy Harley, "Moon Lore," London, 1885.

<sup>21</sup> Harley, *l. c.*

seasons of the moon sought to bring an evil report against the creature, that it might redound to the blasphemy of the Creator." In 1843 Laycock, writing in the *Lancet*,<sup>22</sup> says that it is still a popular opinion that epilepsy, insanity and asthma occur at intervals regulated by the moon, while in 1869 Dr. W. J. Moore,<sup>23</sup> writing in the *Indian Medical Gazette*, feels called upon to criticize and explain the statement of a Dr. Peet that "mariners heedlessly sleeping on deck, are at times quickly affected with night blindness, and the face becomes hideously swollen." Finally the apprehension of a power not understood, of a great unknown force, the fear of mystery is well exemplified in the *Tempest* when Shakespeare makes Prospero say "His mother was a witch, and one so strong that could control the moon."

This last quotation suggests that we might expect to find evidence of attempts to control the power of the moon, especially as we know that primitive man, by the use of magic, is everywhere busily engaged in efforts to direct and control the powers of nature to his advantage. The natives of German New Guinea reckon time by the moon.<sup>24</sup> They throw stones and spears at it to hurry it in its course and so hasten the return of absent friends.

Similarly we might expect that we would find man, instead of trying to control the energy of the moon, would try to so regulate his conduct as to reap the advantages of it. An old work on superstition says<sup>25</sup> "Whatever he would have to grow, he sets about it when she is in her increase; but for what he would have less he chooses her wane." The phases of the moon have been observed for all important acts of life, such as tilling, building, marriages, bleeding, etc. The time for felling trees is during the moon's wane, but the Wabondei of eastern Africa, when about to build a house, cut the posts when the moon is waxing,<sup>26</sup> otherwise they would soon rot.

<sup>22</sup> T. Laycock, "On Lunar Influence, Being a Fourth Contribution to Proleptics," *Lancet*, June 24, 1843.

<sup>23</sup> W. J. Moore, "On Maladies Attributed to Lunar Influence—Rheumatism, Paralysis, Ocular, etc.," *The Indian Medical Gazette*, September 1, 1869.

<sup>24</sup> Frazer, "The Magic Art," Vol. I, p. 319.

<sup>25</sup> Frazer, "The Golden Bough," Part IV, "Adonis, Attis, Osiris," p. 362.

<sup>26</sup> Frazer, "Adonis, Attis, Osiris," p. 365.



Another quality of energy which we might expect to find exemplified in moon myth on the general energetic conception that we have adopted here is that the results are good when the energy is growing but evil when the energy is wasting away. This can be understood if we remember that the moon as an energy symbol represents the energy in man. Similarly the increase and decrease of the moon may be representative, and therefore thought of as the cause of the increase or decrease of certain phenomena such as disease &c. Beliefs of this sort would naturally attach themselves to the phenomena of the waxing and waning which are such striking attributes of this orb, not only because of easy visibility, but because they recur at such short intervals that they run no risk of being overlooked. The waxing and waning and the periodicity of these changes are perhaps the most prominent of the characteristics of the moon to be woven into its mythology.

Horace noted<sup>27</sup> the superiority of shell fish during the moon's increase. Pliny had similar beliefs.<sup>28</sup> Dimerbrock said<sup>29</sup> of the pestilence that ravaged Noyen in 1636 that it exercised its greatest ravages at the approach of the full moon and nearly all of those attacked at that time died.

Hammet wrote<sup>30</sup> that the only treatment given for mental diseases in Egypt consisted of pellets of the flesh of an indigenous serpent administered at the full of the moon. Warrich,<sup>31</sup> one time professor of clinical medicine in Vienna, the author of a method of treatment for tenia, recommended that it be followed during the waning moon. Adolphus<sup>32</sup> was celebrated for his treatment of the itch, which consisted of rubbing the body with an ointment which he recommended be commenced when the moon was waning. It is of course perfectly clear that, in these instances, the disease will disappear as the moon grows less. This way of thinking about the influence of the moon is especially well shown by a Swedish superstition.<sup>33</sup> House-wives will not slaughter for the family during the wane of the moon lest the meat should shrivel and melt away in the pot.

<sup>27</sup> Winslow, *l. c.*

<sup>28</sup> Winslow, *l. c.*

<sup>29</sup> Cited by P. Foissac, "The Influence of the Lunar Phases on the Physical and Moral Man," *St. Louis Med. and Surg. Jour.*, November, 1855.

<sup>30</sup> Foissac, *l. c.*

<sup>32</sup> Foissac, *l. c.*

<sup>31</sup> Foissac, *l. c.*

<sup>33</sup> Harley, *l. c.*

So man has come to formulate a belief in the sympathetic relation between the moon and things upon this earth. Everything increases and decreases as it waxes and wanes. Such beliefs have had much to do in controlling man's conduct, particularly in his relations to nature. In Tusser's "Five Hundred Points of Husbandry," we find the following agricultural directions:

"Sow peas and beans in the wane of the moon;  
Who soweth them sooner he soweth too soon;  
That they with the planet may rest and rise,  
And flourish with bearing most plentiful-wise."

Hesiod asserted<sup>34</sup> that the fourth day was propitious but the eighteenth bad, especially for the female. John of Beverly, being called by an abbess to see a sister who had developed dangerous symptoms after bleeding, when informed that she had been bled on the fourth day of the moon blamed the abbess severely for her ignorance, saying:<sup>35</sup> "I remember that Archbishop Theodore, of blessed memory, said, that bleeding was very dangerous at the time when both the light of the moon and the flood of the ocean were on the increase."

Elaborate studies have been made to determine the relation of the moon's phases to the recurrence of excitement, the pulse rate, sex, hemorrhages, births and deaths. There was an old belief in the Netherlands<sup>36</sup> that fat people died at the flood and thin people at the ebb of the tide. In the isle and city of Cadiz it was believed<sup>37</sup> that sick people never died while the tide was rising but always during its ebb. Dr. Moseley made a study<sup>38</sup> that proved that very old people died at the new or full moon.

Certain of the peoples of the Malay Peninsula have a tradition<sup>39</sup> that originally men did not die but grew thin as the moon waned and fat as it waxed. Sanctorius, in his Aphorisms of Medicine, says<sup>40</sup> that a healthy man gains one or two pounds at the commencement of the lunar month and loses it towards the end. The poet Licilius says<sup>41</sup> that mussels, oysters, and other

<sup>34</sup> Laycock, *l. c.*

<sup>36</sup> Laycock, *l. c.*

<sup>35</sup> Laycock, *l. c.*

<sup>37</sup> Laycock, *l. c.*

<sup>38</sup> Laycock, *l. c.*

<sup>39</sup> Frazer, "Adonis, Attis, Osiris," p. 369.

<sup>40</sup> Foissac, *l. c.*

<sup>41</sup> Foissac, *l. c.*

shell fish are fatter during the waxing of the moon than during the waning.

This element of periodicity is constantly recurring. Of course it is perhaps most persistently associated with the menstrual flux. The Egyptian hieroglyph for month is a lunar crescent.<sup>42</sup> The idea of the influence of the moon is conjoined to the doctrine of septenaries because the observed vital period of seven days was conterminous with the lunar period of seven days or one week. Galen discussed<sup>43</sup> the connection between the moon's influence and critical days.

The vibration of the moon between extremes suggests the idea of inconstancy. Juliet reproves her lover for swearing by the moon:

"O swear not by the moon, the inconstant moon,  
That monthly changes in her circled orb,  
Lest that thy love prove likewise variable."

Coming back to our conception of the moon as a symbol of the great creative energy we would expect it to have certain sexual significance. We have seen this with relation to the dependence of crops upon the phases of the moon and the praying of pregnant women to the moon. Egede says<sup>44</sup> of the barbarous Greenlanders that they imagined the moon visited their wives now and then and that staring long at it when it was full would make a maid pregnant.

We would also expect that sex would be attributed to the moon itself, but as the creative energy can as well be considered as male or female we would expect to find that the moon has sometimes been considered as the one, sometimes as the other.

In French and Italian the moon is feminine, in German it is masculine gender. Among the Esquimaux the sun is a maiden and the moon is her brother; the tribes of the Malayan Peninsula believe that the moon is a woman and the stars are her children; in South America there is a legend that the moon is a man and the sun is his wife.<sup>45</sup>

Perhaps no sex problem has so tormented the mind of man as

<sup>42</sup> Laycock, *l. c.*

<sup>43</sup> Laycock, *l. c.*

<sup>44</sup> Winslow, *l. c.*

<sup>45</sup> T. F. Thiselton Dyer, "The Moon and its Folk-Lore," *Gentlemen's Magazine*, August, 1880.



the problem of incest. All peoples have incest taboos of one sort or another and many primitive peoples have elaborate social institutions to solve this vexatious issue. It would be strange if such an important influence as that of the moon's were not found to reflect this conflict.

Accordingly we find among the Khasias of the Himalaya the belief<sup>46</sup> that every month the moon falls in love with his mother-in-law who throws ashes in his face, whence the spots.

The Greenlanders have a story<sup>47</sup> that the sun and moon are sister and brother. Malina being teased by her brother Anninga smeared her hands with soot from the lamp and rubbed them over his face so that she would know him by daylight, hence the spots. Malina then ran away from her brother who followed her. At length she flew upward and became the sun; he followed and became the moon. He was unable to mount as high as she and therefore continually runs about the sun hoping to surprise her. When he is tired and hungry, in his last quarter, he leaves his house on a sledge harnessed to four large dogs and hunts seals for several days. He fattens so on the spoils of the chase that he soon grows into the full moon. He rejoices in the death of women and the sun has her revenge by the death of men. All men therefore keep indoors during an eclipse of the sun and women during an eclipse of the moon.

In the Egyptian mythology Osiris and Isis are identified with the sun and moon. They are at once brother and sister and husband and wife. It is so also with the Peruvian sun and moon, so that the sister-marriage of the Incas was reflected in their mythology.<sup>48</sup>

Coming back yet again to our energetic conception as a starting point. The flow of the creative energy is life itself. The opposite idea is death. Do we find the fundamental ideas of life, death, resurrection, and immortality reflected in man's thinking about the moon?

The Hottentots have a characteristic tradition to account for the origin of death.<sup>49</sup> The moon charged the hare to go to men

<sup>46</sup> Thiselton Dyer, *l. c.*

<sup>47</sup> Harley, *l. c.*

<sup>48</sup> Edward B. Tylor, "Primitive Culture," Boston, 1874.

<sup>49</sup> J. G. Frazer, "The Belief in Immortality and the Worship of the Dead," Vol. I, p. 65.

and say, "As I die and rise to life again, so shall you die and rise to life again." The hare went to deliver this message but from forgetfulness or malice reversed the message and said, "As I die and do not rise to life again, so you shall also die and not rise to life again." When he returned to the moon and told him what he had said the moon was very angry and threw a stick at him, splitting his lip, which is the reason why the hare has to this day a split lip. The hare ran away, but some say that before he fled he clawed the moon's face which still bears the marks he made.

The Chams of Annam and Cambodia believe<sup>50</sup> that the goddess of good luck used to bring people to life as fast as they died until the sky-god became tired of her constant interference with the laws of nature and transferred her to the moon where it is no longer in her power to bring the dead to life again.

Another story of the origin of death is believed by the Nandi of British East Africa.<sup>51</sup> They say that when the first people lived on earth a dog came one day to them and said: "All people will die like the moon, but unlike the moon you will not return to life again unless you give me some milk to drink out of your gourd, and beer to drink through your straw. If you do this, I will arrange for you to go to the river when you die and to come to life again on the third day." Unfortunately the people laughed at the dog and gave him milk and beer to drink from a stool. The dog was very angry at not being served like human beings and though he drank his milk and beer he left in anger saying, "All people will die, and the moon alone will return to life." That is why when people die they do not come back, but when the moon goes away it returns after three days.

In these stories we see how primitive man in contemplating the regularly recurring birth and resurrection of the moon conceived the notion that he too might have been immortal if it had not been for some misfortune. The stories proceed to describe the nature of that misfortune.

In the material thus far presented I have tried to show how the moon, considered as a libido symbol, a symbol of the great creative energy that throbs itself out in us and in all living things, comes to be identified with the various and multiform manifesta-

<sup>50</sup> Frazer, "Immortality," p. 67.

<sup>51</sup> Frazer, "Immortality," p. 66.

tions of that energy. How it comes to be an outward expression of good and bad, of luck and misfortune; how its influence makes for that which is constructive or living or that which spells destruction and death; and so how it comes finally to be closely associated in the mind of man with those fundamental conceptions of life, death, resurrection and immortality.

I have outlined by numerous illustrations something of the part that moon myth has played in influencing the practice of medicine, and finally I have endeavored to formulate an interpretation, based upon the newer concepts which have grown out of our psychoanalytic work. The illustrations for this interpretative formulation, however, I have had to take from a much wider source than that of the specific realm of medicine.

Now it remains to be seen whether the facts of child psychology bear out the genetic interpretation. If we are correct in the general assumption that the child in its development recapitulates in miniature the development of the race the materials of child psychology should bear out the conclusions thus far reached.

The material from which I shall draw these final illustrations was collected by Dr. G. Stanley Hall in response to a questionnaire and are referred to by Slaughter in his article on "The Moon in Childhood and Folklore."<sup>52</sup> I will group the illustrations as I have those already quoted.

As a symbol of energy, mysterious and therefore frightful, a girl of nineteen<sup>53</sup> says: "Never dared make a face at the moon lest she should be struck dead."

The naïve way of thinking of the moon that we have seen illustrated by the savages and which represents the animistic level of culture is illustrated by a boy of five, who says: "Ran suddenly out doors to hide, in a game, and found a bright moon, and shouted 'get out of the way, there, you saucy old thing, or I will give you a slap'"; a boy of fifteen "used to go out and talk to the moon if in a bad humor, told all his secrets and told him not to tell"; a girl of eighteen "used to want to hug and kiss the moon, and once asked it to marry her."

<sup>52</sup> *American Journal of Psychology*, April, 1902.

<sup>53</sup> The ages here given refer to the age at the time of answering the questionnaire, not the age at the time of the given experience, which was during childhood.



As an example of good and bad a girl of eighteen replies, "I thought the moon smiled at good girls, and frowned at us if we were bad. Often I could not feel sure which it did, and would ask mamma if I had been good or bad that day"; a boy of twenty "used to think if he was bad it would come close to earth and punish him"; a girl of nineteen, "If good, it came near; if she was bad it went back into the sky"; a girl of fourteen "used to think it shone bright if she was good, and was pale if she was bad"; a girl of seventeen replied that she "was ashamed and afraid to have the moon see her misbehave or know of her bad acts."

The sex of the moon is indicated by a boy of nine who answered that "It must be a man to be strong enough to give light so far." One boy always thought of it as a muffled female form with heavily veiled head, while a boy of seven thought "It is only a small child, and no one can tell whether it is a boy or a girl."

The sexual significance of the moon has already been illustrated by the girl who "asked it to marry her." It is further illustrated by a girl of nine who said, "The moon makes me think of love, because the man and woman in it make love and will marry sometime"; and a girl of eleven who said, "The moon is sad, because she is the sun's wife, and he is proudest and they do not live together."

The sympathy between the moon and mundane things is illustrated by a young lady of twenty-nine who replied that "Once thought things grew big and small, as the moon did."

A significant reply that correlates it with a phallic symbol in such beliefs as that it can make women pregnant and also is significant of its destructive power as set forth in a medieval conception which considered it as the seat of hell is furnished by the reply of a sixteen year old girl who "used to think it a big eye glaring at her, and later heard it was full of dead people." The moon has been thought of in the opposite way by many peoples as a blessed land, a paradise. The ancients said the bright patches were plains and the spots Diana's hunting ground. The South Pacific Islanders thought the moon spots splendid groves. The Greeks referred to it as elysium, the blessed land where all enmities were forgotten.<sup>54</sup>

<sup>54</sup> Slaughter, *l. c.*

The propitiation of the moon and the effort to gain its beneficent influence is illustrated by the reply of a sixteen year old girl who "Heard it was good luck to courtesy to it and call it lady moon."

A final word to illustrate how the interpretative formula which I have endeavored to set forth in this paper strikes at the very fundamental necessities of human thinking.

The reader must have been struck in each set of illustrations by the fact that we invariably found ourselves confronted by two exactly opposite conceptions—good and bad, male and female, life and death. This type of thinking has been formulated in the concept of the ambivalence of the thought process.<sup>55</sup> It tends in two mutually opposed directions. The idea that lies closest to long is that of short: to hot is cold: to white is black: to thick is thin: to fat is lean, etc., etc.

This principle is involved in some of the oldest of human documents. It is exemplified in the Yih system of the Chinese as set forth in the Yih King, one of the most ancient of human documents.<sup>56</sup> "He who understands the yih is supposed to possess the key to the riddle of the universe.

"The yih is capable of representing all combinations of existence. The elements of the yih, yang the positive principle and yin the negative principle, stand for the elements of being. Yang means 'bright' and yin, 'dark.' Yang is the principle of heaven; yin, the principle of the earth. Yang is the sun, yin is the moon. Yang is masculine and active; yin is feminine and passive. The former is motion; the latter is rest. Yang is strong, rigid, lord-like; yin is mild, pliable, submissive, wife-like. The struggle between, and the different mixture of, these two elementary contrasts, condition all the differences that prevail, the state of the elements, the nature of things, and also the character of the various personalities as well as the destinies of human beings."

Here we have our modern libido theory in this ancient Chinese document, mention of which has been found as early as 1122

<sup>55</sup> E. Bleuler, "The Theory of Schizophrenic Negativism," *Nervous and Mental Disease Monograph Series*, No. 11.

<sup>56</sup> Paul Carus, "Chinese Thought," Open Court Pub. Co., Chicago, 1907.

B.C. We probably have a similar system in the Urim and Thummim of the Hebrews.<sup>57</sup>

We have followed the moon myths in their various forms and we have seen how man's way of thinking and how his degree of cultural development has been reflected in the way he thought about the moon.

The libido, the creative energy has always to find expression in some way. In the earliest stages of man's development the expression is necessarily crude and concrete. As he progresses in the path of civilization this expression becomes more subtle, more abstract.

These changing ways of thinking, as they related themselves to the moon, we have seen influence profoundly man's conduct, and in particular they have influenced him in the practice of the healing art.

In order to understand these particular manifestations, as we meet them in the history of medicine, we have had to go far afield in search of guiding principles, and while this paper may appear to be less an essay in the history of medicine than in comparative mythology, the medical facts standing alone would have had little meaning if they had not been illuminated from these other sources.

<sup>57</sup> Paul Carus, "The Oracle of Yahveh," Open Court Pub. Co., Chicago, 1911.



## THE SADISM IN OSCAR WILDE'S "SALOME"

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The episode of the beheading of John the Baptist at the request of Salome, daughter of Herodias, as related in Mark, is merely an amplification of the incident as described in Matthew.<sup>1</sup> In both narratives it is stated that the execution was carried out for political and religious purposes, as John had condemned and declared unlawful and incestuous the marriage of Herod to his brother's wife. Josephus gives practically an identical account of this episode, while Graetz in his history of the Jews refers to the story of bringing the severed head of John upon a platter as a "mere myth." In the Gospels it is the mother of Salome who requests her daughter to ask for the severed head of John as a compensation for her dancing, but Wilde, in dramatizing the episode, makes Salome ask for the head directly without any hint from her mother, in order to harmonize the reconstructed narrative with his conception of a sadistic impulse. In any event, however, neither in the Gospels nor in the historical accounts was the execution of John the Baptist carried out for more than a religious or a political purpose. Wilde, however, with his insight into sexual perversions and into the polymorphous sexual instinct of man, because he was himself a sufferer, made an innovation in his dramatic treatment of the legend as a sadistic episode. In his tragedy of *Salome*, he portrays the daughter of Herodias as a sadist and her desire for the head of John the Baptist is not for religious or political revenge, but to fulfill her sadistic desires.

This is a bold invention, but certain hints of a sadistic trend in Wilde himself, who, as is well known, was a victim of homosexuality, can be found in other of his published writings. In the "Picture of *Dorian Gray*," for instance, the hero of the novel found a "horrible fascination" in reading about the tortures and the "awful and beautiful forms of those whom Vice and Blood and Weariness had made monstrous or mad." Likewise in the

<sup>1</sup> Mark, Chapter IV, V, 17 et seq; Matthew, Chapter XIV, V, 17 et seq.

"Ballad of Reading Goal," there are distinct hints of sadistic feelings in the stanza—

"Some kill their love when they are young  
And some when they are old:  
Some strangle with the hands of Lust,  
Some with hands of Gold."

It is not at all surprising that since Wilde was able to give so clear and vivid a portrayal of homosexuality in the "Picture of Dorian Gray," because he himself had strong homosexual tendencies, that he should at the same time be aware of the fact that sexual perversions are frequently polymorphous and that in his own homosexuality there were strong elements of sadism. It is this sadism which he portrayed in "Salome." Thus the tragedy becomes in a sense autobiographical in the manner that the homosexuality of "Dorian Gray" was autobiographical. In fact, the play was produced in Paris about a year before the famous libel action which sent Wilde to jail for two years. In this beautiful tragedy Wilde clearly indicates the intimate relationship between sexuality and cruelty.

Sadism is less common in women than in men. It is likewise more difficult to understand sadistic tendencies in woman, because woman is sexually less aggressive. However, the unconscious roots of sadism exist in women as well as in men, but woman has more successfully sublimated her aggressive sexual attitude, due, no doubt, to the repressive effect of society from the earliest dawn of history. Sometimes, in women, this repressed sexual aggression will break out in a social conflict, for instance, the actions of the militant suffragettes in England.

In tracing out the dialogue of the tragedy, the evolution of the sadistic tendency of Salome, which was completely satisfied only by the actual lust murder of John the Baptist, is clearly indicated. Salome's sexual feeling is evidently aroused by Herod, for in her first appearance she utters the words—"I will not stay. I cannot stay. Why does the Tetrarch look at me all the while with his mule's eyes under his shaking eyelids? It is strange that the husband of my mother looks at me like that." Her first sexual interest in John is worked up with terrible intensity from the words "Speak again Jokanaan. Thy voice is like music to mine

ear," to the erotic reiteration of "I am amorous of thy body. . . . There is nothing in the world so red as thy mouth. Suffer me to kiss thy mouth. I will kiss thy mouth, Jokanaan."

After the oath of Herod and when the feast begins, Salome dances with naked feet in the blood of the young Syrian who committed suicide earlier in the course of the play and for whom she had a certain amount of erotic affection. This dancing with naked feet in human blood is another evidence of her sadism which for the first time has overcome her resistance. The height of sadistic ecstasy is reached when she bends over the cistern to watch the execution of John and when she cries out to the executioner, "Strike, strike, Naaman, strike I tell you." Her sexual excitement here coincides with her wish to see pain and suffering.

When Salome seizes the severed head she then shows the acme of her sadistic ecstasy—"Ah! thou wouldst not suffer me to kiss thy mouth, Jokanaan. Well, I will kiss it now. I will bite it with my teeth as one bites a ripe fruit. Yes, I will kiss thy mouth, Jokanaan. . . . Ah! Jokanaan, thou wert the man that I loved alone among men. All other men were hateful to me. But thou wert beautiful! . . . There was nothing in the world so white as thy body. There was nothing in the world so black as thy hair. . . . I saw thee and I loved thee! Oh, how I loved thee! I love thee yet, Jokanaan, I love only thee. I am athirst for thy beauty; I am hungry for thy body; and neither wine nor apples can appease my desire. . . . I was a virgin, and thou didst take my virginity from me. I was chaste, and thou didst fill my veins with fire."

The tragedy ends with a last wail of sadistic ecstasy as the aggressive aspect of the libido has become completely satisfied. "Ah! I have kissed thy mouth, Jokanaan, I have kissed thy mouth. There was a bitter taste on my lips. Was it the taste of blood? Nay, but perchance it was the taste of love. But what matter! What matter? I have kissed thy mouth."

Her sadism is not understood except as an act of horror and she is killed by the order of Herod. So ends the short tragedy, but it remains as one of the finest examples of the portrayal of the sadistic impulse in literature and it could only have been written by a man who had himself within him well marked sadistic feelings as he had of homosexuality.



# THE THEORY OF PSYCHOANALYSIS

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*(Continued from page 177)*

Both phantasy-complexes develop with growing age, and reach a new stage after puberty, when the emancipation from the parents is more or less attained. The symbol of this time is the one already previously mentioned; it is the symbol of self-sacrifice. The more the sexuality develops the more the individual is forced to leave his family and to acquire independence and autonomy. By its history, the child is closely connected with its family and specially with its parents. In consequence, it is often with the greatest difficulty that the child is able to free itself from its infantile surroundings. The Œdipus- and Electra-complex give rise to a conflict, if adults cannot succeed in spiritually freeing themselves; hence arises the possibility of neurotic disturbance. The libido, which is already sexually developed, takes possession of the form given by the complex and produces feelings and phantasies which unmistakably show the effective existence of the complex, till then perfectly unconscious. The next consequence is the formation of intense resistances against the immoral inner impulses which are derived from the now active complexes. The conscious attitude arising out of this can be of different kinds. Either the consequences are direct, and then we notice in the son strong resistances against the father and a typical affectionate and dependent attitude toward the mother; or the consequences are indirect, that is to say, compensated, and we notice, instead of the resistances toward the father, a typical submissiveness here, and an irritated antagonistic attitude toward the mother. It is possible that direct and compensated consequences take place alternately. The same thing is to be said of the Electra-complex. If the libido-sexualis were to cleave fast to these particular forms of the conflict, murder and

incest would be the consequence of the Œdipus and Electra conflicts. These consequences are naturally not found among normal people, and not even among amoral ("moral" here implying the possession of a rationalized and codified moral system) primitive persons, or humanity would have become extinct long ago. On the contrary, it is in the natural order of things that what surrounds us daily and has surrounded us, loses its compelling charm and thus forces the libido to search for new objects, an important rule which prevents parricide and inbreeding.

The further development of the libido toward objects outside the family is the absolutely normal and right way of proceeding, and it is an abnormal and morbid phenomenon if the libido remains, as it were, glued to the family. Some indications of this phenomenon are nevertheless to be noticed in normal people. A direct outcome of the infantile-complex is the unconscious phantasy of self-sacrifice, which occurs after puberty, in the succeeding stage of development. Of this I gave a detailed example in my work, "*Wandlungen und Symbole der Libido.*" The phantasy of self-sacrifice means sacrificing infantile wishes. I have shown this in the work just mentioned and in the same place I have referred to the parallels in the history of religions.

#### THE PROBLEMS OF THE INCEST-COMPLEX

Freud has a special conception of the incest-complex which has given rise to heated controversy. He starts from the fact that the Œdipus-complex is generally unconscious, and conceives this as the result of a repression of a moral kind. It is possible that I am not expressing myself quite correctly, when I give you Freud's view in these words. At any rate, according to him the Œdipus-complex seems to be repressed, that is, seems to be removed into the unconscious by a reaction from the conscious tendencies. It almost looks as if the Œdipus-complex would develop into consciousness if the development of the child were to go on without restraint and if no cultural tendencies influenced it. Freud calls this barrier, which prevents the Œdipus-complex from ripening, the *incest-barrier*. He seems to believe, so far as one can gather from his work, that the incest-barrier is the result of experience, of the selective influence of reality, inasmuch as the unconscious strives without restraint, and in an immediate

way, for its own satisfaction, without any consideration for others. This conception is in harmony with the conception of Schopenhauer, who says of the blind world-will that it is so egoistic that a man could slay his brother merely to grease his boots with his brother's fat. Freud considers that the psychological incest-barrier, as postulated by him, can be compared with the incest-taboo which we find among inferior races. He further believes that these prohibitions are a proof of the fact that men really desired incest, for which reason laws were framed against it even in very primitive cultural stages. He takes the tendency towards incest to be an absolute concrete sexual wish, lacking only the quality of consciousness. He calls this complex the root-complex, or nucleus, of the neuroses, and is inclined, viewing this as the original one, to reduce nearly the whole psychology of the neuroses, as well as many other phenomena in the world of mind, to this complex.

## CHAPTER VIII

### THE ETIOLOGY OF THE NEUROSES

With this conception of Freud's we have to return to the question of the etiology of the neuroses. We have seen that the psychoanalytic theory began with a traumatic event in childhood, which was only later on found to be a phantasy, at least in many cases. In consequence, the theory became modified, and tried to find in the development of abnormal phantasy the main etiological significance. The investigation of the unconscious, made by the collaboration of many workers, carried on over a space of ten years, provided an extensive empirical material, which demonstrated that the incest-complex was the beginning of the morbid phantasies. But it was no longer thought that the incest-complex was a special complex of neurotic people. It was demonstrated to be a constituent of a normal infantile psyche too. We cannot tell, by its mere existence, if this complex will give rise to a neurosis or not. To become pathogenic, it must give rise to a conflict; that is, the complex, which in itself is harmless, has to become dynamic, and thus give rise to a conflict.

Herewith, we come to a new and important question. The



whole etiological problem is altered, if the infantile "root-complex" is only a general form, which is not pathogenic in itself, and requires, as we saw in our previous exposition, to be subsequently set in action. Under these circumstances, we dig in vain among the reminiscences of earliest childhood, as they give us only the general forms of the later conflicts, but not the conflict itself.

I believe the best thing I can do is to describe the further development of the theory by demonstrating the case of that young lady whose story you have heard in part in one of the former lectures. You will probably remember that the shying of the horses, by means of the anamnestic explanation, brought back the reminiscence of a comparable scene in childhood. We here discussed the trauma theory. We found that we had to look for the real pathological element in the exaggerated phantasy, which took its origin in a certain retardation of the psychic sexual development. We have now to apply our theoretical standpoint to the origin of this particular type of illness, so that we may understand how, just at that moment, this event of her childhood, which seemed to be of such potency, could come to constellation.

The simplest way to come to an understanding of this important event would be by making an exact inquiry into the circumstances of the moment. The first thing I did was to question the patient about the society in which she had been at that time, and as to what was the farewell gathering to which she had been just before. She had been at a farewell supper, given in honor of her best friend, who was going to a foreign health-resort for a nervous illness. We hear that this friend is happily married, and is the mother of one child. We have some right to doubt this assertion of her happiness. If she were really happily married, she probably would not be nervous and would not need a cure. When I put my question differently, I learned that my patient had been brought back into the host's house as soon as she was overtaken by her friends, as this house was the nearest place to bring her to in safety. In her exhausted condition she received his hospitality. As the patient came to this part of her history she suddenly broke off, was embarrassed, fidgetted and tried to turn to another subject. Evidently we had now come upon

some disagreeable reminiscences, which suddenly presented themselves. After the patient had overcome obstinate resistances, it was admitted that something very remarkable had happened that night. The host made her a passionate declaration of love, thus giving rise to a situation that might well be considered difficult and painful, considering the absence of the hostess. Ostensibly this declaration came like a flash of lightning from a clear sky. A small dose of criticism applied to this assertion will teach us that these things never drop from the clouds, but have always their previous history. It was the work of the following weeks to dig out piecemeal a whole, long love-story.

I can thus roughly describe the picture I got at finally. As a child the patient was thoroughly boyish, loved only turbulent games for boys, laughed at her own sex, and flung aside all feminine ways and occupations. After puberty, the time when the sex-question should have come nearer to her, she began to shun all society; she hated and despised, as it were, everything which could remind her even remotely of the biological destination of mankind, and lived in a world of phantasies which had nothing in common with the rude reality. So she escaped, up to her twenty-fourth year, all the little adventures, hopes and expectations which ordinarily move a woman of this age. (In this respect women are very often remarkably insincere towards themselves and towards the physician.) But she became acquainted with two men who were destined to destroy the thorny hedge which had grown all around her. Mr. A. was the husband of her best friend at the time; Mr. B. was the bachelor-friend of this family. Both were to her taste. It seemed to her pretty soon that Mr. B. was much more sympathetic to her, and from this resulted a more intimate relationship between herself and him, and the possibility of an engagement was discussed. Through her relations with Mr. B., and through her friend, she met Mr. A. frequently. In an inexplicable way his presence very often excited her and made her nervous. Just at this time our friend went to a big party. All her friends were there. She became lost in thought, and played as in a dream with her ring, which suddenly slipped from her hand and rolled under the table. Both men tried to find it, and Mr. B. managed to get it. With an expressive smile he put the ring back on her finger and

said: "You know what this means?" At that moment a strange and irresistible feeling came over her, she tore the ring from her finger and threw it out of the open window. Evidently a painful moment ensued, and she soon left the company, feeling deeply depressed. A short time later she found herself, for her holidays, accidentally in the same health-resort where Mr. A. and his wife were staying. Mrs. A. now became more and more nervous, and, as she felt ill, had to stay frequently at home. The patient often went out with Mr. A. alone. One day they were out in a small boat. She was boisterously merry, and suddenly fell overboard. Mr. A. saved her with great difficulty, and lifted her, half unconscious, into the boat. He then kissed her. With this romantic event the bonds were woven fast. To defend herself, our patient tried energetically to get herself engaged to Mr. B., and to imagine that she loved him. Of course this queer play did not escape the sharp eye of feminine jealousy. Mrs. A., her friend, felt the secret, was worried by it, and her nervousness grew proportionately. It became more and more necessary for her to go to a foreign health-resort. The farewell-party was a dangerous opportunity. The patient knew that her friend and rival was going off the same evening, so Mr. A. would be alone. Certainly she did not see this opportunity clearly, as women have the notable capacity "to think" purely emotionally, and not intellectually. For this reason, it seems to them as if they never thought about certain matters at all, but as a matter of fact she had a queer feeling all the evening. She felt extremely nervous, and when Mrs. A. had been accompanied to the station and had gone, the hysterical attack occurred on her way back. I asked her of what she had been thinking, or what she felt at the actual moment when the trotting horses came along. Her answer was, she had only a frightful feeling, the feeling that something dreadful was very near to her, which she could not escape. As you know, the consequence was that the exhausted patient was brought back into the house of the host, Mr. A. A simple human mind would understand the situation without difficulty. An uninitiated person would say: "Well, that is clear enough, she only intended to return by one way or another to Mr. A.'s house," but the psychologist would reproach this layman for his incorrect way of expressing himself, and would tell him that the patient was not



conscious of the motives of her behavior, and that it was, therefore, not permissible to speak of the patient's intention to return to Mr. A.'s house.

There are, of course, learned psychologists who are capable of furnishing many theoretical reasons for disputing the meaning of this behavior. They base their reasons on the dogma of the identity of consciousness and psyche. The psychology inaugurated by Freud recognized long ago that it is impossible to estimate psychological actions as to their final meaning by conscious motives, but that the objective standard of their psychological results has to be applied for their right evaluation. Now-a-days it cannot be contested any longer that there are unconscious tendencies too, which have a great influence on our modes of reaction, and on the effects to which these in turn give rise. What happened in Mr. A.'s house bears out this observation; our patient made a sentimental scene, and Mr. A. was induced to answer it with a declaration of love. Looked at in the light of this last event, the whole previous history seems to be very ingeniously directed towards just this end, but throughout the conscience of the patient struggled consciously against it. Our theoretical profit from this story is the clear perception that an unconscious purpose or tendency has brought on to the stage the scene of the fright from the horses, utilizing thus very possibly that infantile reminiscence, where the shying horses galloped towards the catastrophe. Reviewing the whole material, the scene with the horses—the starting point of the illness—seems now to be the keystone of a planned edifice. The fright, and the apparent traumatic effect of the event in childhood, are only brought on the stage in the peculiar way characteristic of hysteria. But what is thus put on the stage has become almost a reality. We know from hundreds of experiences that certain hysterical pains are only put on the stage in order to reap certain advantages from the sufferer's surroundings. The patients not only believe that they suffer, but their sufferings are, from a psychological standpoint, as real as those due to organic causes; nevertheless, they are but stage-effects.

## THE REGRESSION OF LIBIDO

This utilization of reminiscences to put on the stage any illness, or an apparent etiology, is called a *regression of the libido*. The libido goes back to reminiscences, and makes them actual, so that an apparent etiology is produced. In this case, by the old theory, the fright from the horses would seem to be based on a former shock. The resemblance between the two scenes is unmistakable, and in both cases the patient's fright is absolutely real. At any rate, we have no reason to doubt her assertions in this respect, as they are in full harmony with all other experiences. The nervous asthma, the hysterical anxiety, the psychogenic depressions and exaltations, the pains, the convulsions—they are all very real, and that physician who has himself suffered from a psychogenic symptom knows that it feels absolutely real. Regressively re-lived reminiscences, even if they were but phantasies, are as real as remembrances of events that have once been real.

As the term "regression of libido" shows, we understand by this retrograde mode of application of the libido, a retreat of the libido to former stages. In our example, we are able to recognize clearly the way the process of regression is carried on. At that farewell party, which proved a good opportunity to be alone with the host, the patient shrank from the idea of turning this opportunity to her advantage, and yet was overpowered by her desires, which she had never consciously realized up to that moment. The libido was not used consciously for that definite purpose, nor was this purpose ever acknowledged. The libido had to carry it out through the unconscious, and through the pretext of the fright caused by an apparently terrible danger. Her feeling at the moment when the horses approached illustrates our formula most clearly; she felt as if something inevitable had now to happen.

The process of regression is beautifully demonstrated in an illustration already used by Freud. The libido can be compared with a stream which is dammed up as soon as its course meets any impediment, whence arises an inundation. If this stream has previously, in its upper reaches, excavated other channels, then these channels will be filled up again by reason of the damming below. To a certain extent they would appear to be real river

beds, filled with water as before, but at the same time, they only have a temporary existence. It is not that the stream has permanently chosen the old channels, but only for as long as the impediment endures in the main stream. The affluents do not always carry water, because they were from the first, as it were, not independent streams, but only former stages of development of the main river, or passing possibilities, to which an inundation has given the opportunity for fresh existence. This illustration can directly be transferred to the development of the application of the libido. The definite direction, the main river, is not yet found during the childish development of sexuality. The libido goes instead into all possible by-paths, and only gradually does the definite form develop. But the more the stream follows out its main channel, the more the affluents will dry up and lose their importance, leaving only traces of former activity. Similarly, the importance of the childish precursors of sexuality disappears completely as a rule, only leaving behind certain traces.

If in later life an impediment arises, so that the damming of the libido reanimates the old by-paths, the condition thus excited is properly a new one, and something abnormal.

The former condition of the child is normal usage of the libido, whilst the return of the libido towards the childish past is something abnormal. Therefore, in my opinion, it is an erroneous terminology to call the infantile sexual manifestations "perversions," for it is not permissible to give normal manifestations pathological terms. This erroneous usage seems to be responsible for the confusion of the scientific public. The terms employed in neurotic psychology have been misapplied here, under the assumption that the abnormal by-paths of the libido discovered in neurotic people are the same phenomena as are to be found in children.

#### THE INFANTILE AMNESIA CRITICIZED

The so-called *amnesia of childhood*, which plays an important part in the "Three Contributions," is a similar illegitimate retrograde application from pathology. Amnesia is a pathological condition, consisting in the repression of certain contents of the conscious. This condition cannot possibly be the same as the antegrade amnesia of children, which consists in an incapacity for



intentional reproduction, a condition we find also among savages. This incapacity for reproduction dates from birth, and can be understood on obvious anatomical and biological grounds. It would be a strange hypothesis were we willing to regard this totally different quality of early infantile consciousness as one to be attributed to repression, in analogy with the condition in neurosis. The amnesia of neurosis is punched out, as it were, from the continuity of memory, but the remembrances of earlier childhood exist in separate islands in the continuity of the non-memory. This condition is the opposite in every sense of the condition of neurosis, so that the expression "amnesia," generally used for this condition, is incorrect. The "amnesia of childhood" is a conclusion *a posteriori* from the psychology of neurosis, just as is the "polymorphic perverse" disposition of the child.

#### THE LATENT SEXUAL PERIOD CRITICIZED

This error in the theoretical conception is shown clearly in the so-called *latent sexual period of childhood*. Freud has remarked that the early infantile so-called sexual manifestations, which I now call the phenomena of the pre-sexual stage, vanish after a while, and only reappear much later. Everything that Freud has termed the "suckling's masturbation," that is to say, all those sexual-like actions of which we spoke before, are said to return later as real onanism. Such a process of development would be biologically unique. In conformity with this theory one would have to say, for instance, that when a plant forms a bud, from which a blossom begins to unfold, the blossom is taken back again before it is fully developed, and is again hidden within the bud, to reappear later on in the same form. This impossible supposition is a consequence of the assertion that the early infantile activities of the pre-sexual stage are sexual phenomena, and that those manifestations, which resemble masturbation, are genuinely acts of masturbation. In this way Freud had to assert that there is a disappearance of sexuality, or, as he calls it, a *latent sexual period*. What he calls a disappearance of sexuality is nothing but the *real beginning of sexuality*, everything preceding was but the fore-stage to which no real sexual character can be imputed. In this way, the impossible phenomenon of the latent period is very simply explained. This theory of the latent sexual period

is a striking instance of the incorrectness of the conception of the early infantile sexuality. But there has been no error of observation. On the contrary, the hypothesis of the latent sexual period proves how exactly Freud noticed the apparent recommencement of sexuality. The error lies in the conception. As we saw before, the first mistake consists in a somewhat old-fashioned conception of the multiplicity of instincts. If we accept the idea of two or more instincts existing side by side, we must naturally conclude that, if one instinct has not yet become manifest, it is present in nuce in accordance with the theory of pre-formation. In the physical sphere we should perhaps have to say that, when a piece of iron passes from the condition of heat to the condition of light, the light was already existent in nuce (latent) in the heat. Such assumptions are arbitrary projections of human ideas into transcendental regions, contravening the prescription of the theory of cognition.

We have thus no right to speak of a sexual instinct existing in nuce, as we then give an arbitrary explanation of phenomena which can be explained otherwise, and in a more adequate manner. We can speak of the manifestations of a nutrition instinct, of the manifestations of a sexual instinct, etc., but we have only the right to do so when the function has quite clearly reached the surface. We only speak of light when the iron is visibly luminous, but not when the iron is merely hot. Freud, as an observer, sees clearly that the sexuality of neurotic people is not entirely comparable with infantile sexuality, for there is a great difference, for instance, between the uncleanness of a child of two years old and the uncleanness of a katatonic patient of forty. The former is a psychological and normal phenomenon; the latter is extraordinarily pathological. Freud inserted a short passage in his "Three Contributions" saying that the infantile form of neurotic sexuality is either wholly, or at any rate partly, due to a regression. That is, even in those cases where we might say, these are still the same by-paths, we find that the function of the by-paths is still increased by regression. Freud thus recognizes that the infantile sexuality of neurotic people is *for the greater part* a regressive phenomenon. That this must be so is also shown through the further insight obtained from the investigations of recent years, that the observations concerning the psy-

chology of the childhood of neurotic people hold equally good for normal people. At any rate we can say that the history of the development of infantile sexuality in persons with neurosis differs but by a hair's breadth from that of normal beings who have escaped the attention of the expert appraiser. Striking differences are exceptional.

#### FURTHER REMARKS ON THE ETIOLOGY OF NEUROSIS

The more we penetrate into the heart of infantile development, the more we receive the impression that as little can be found there of etiological significance, as in the infantile shock. Even with the acutest ferreting into history, we shall never discover why people living on German soil had just such a fate, and why the Gauls another. The further we get away, in analytical investigations from the epoch of the manifest neurosis, the less can we expect to find the real motive of the neurosis, since the dynamic disproportions grow fainter and fainter the further we go back into the past. In constructing our theory so as to deduce the neurosis from causes in the distant past, we are first and foremost obeying the impulse of our patients to withdraw themselves as far as possible from the critical present. The pathogenic conflict exists *only in the present moment*. It is just as if a nation wanted to regard its miserable political conditions at the actual moment as due to the past; as if the Germany of the 19th century had attributed its political dismemberment and incapacity to its suppression by the Romans, instead of having sought the actual sources of her difficulties in the present. *Only in the actual present* are the effective causes, and only here are the possibilities of removing them.

#### THE ETIOLOGICAL SIGNIFICANCE OF THE ACTUAL PRESENT

A greater part of the psychoanalytic school is under the spell of the conception that the conflicts of childhood are *conditio sine qua non* for the neuroses. It is not only the theorist, who studies the psychology of childhood from scientific interest, but the practical man also, who believes that he has to turn the history of infancy inside out to find there the dynamic source of the actual neurosis—it were a fruitless enterprise if done under this pre-



sumption. In the meantime, the most important factor escapes the analyst, namely, the conflict and the claims of the present time. In the case before us, we should not understand any of the motives which produced the hysterical attacks if we looked for them in earliest childhood. It is the form alone which those reminiscences determine to a large extent, but the dynamic originates from the present time. The insight into the actual meaning of these motives is real understanding.

We can now understand why that moment was pathogenic, as well as why it chose those particular symbols. Through the conception of regression, the theory is freed from the narrow formula of the importance of the events in childhood, and the actual conflict thus gets that significance which, from an empirical standpoint, belongs to it implicitly. Freud himself introduced the conception of regression in his "Three Contributions," acknowledging rightly that our observations do not permit us to seek the cause of neurosis exclusively in the past. If it is true, then, that reminiscent matter becomes active again as a rule by regression, we have to consider the following question: Have, perhaps, the apparent effective results of reminiscences to be referred in general to a regression of the libido? As I said before, Freud suggested in his "Three Contributions," that the infantilism of neurotic sexuality was, *for the greater part, due to the regression of the libido*. This statement deserves greater prominence than it there received. Freud did give it this prominence in his later works to a somewhat greater extent.

The recognition of the regression of the libido very largely reduces the etiological significance of the events of childhood. It has already seemed to us rather astonishing that the Œdipus- or the Electra-complex should have a determining value in regard to the onset of a neurosis, since these complexes exist in everyone. They exist even with those persons who have never known their own father and mother, but have been educated by their step-parents. I have analyzed cases of this kind, and found that the incest-complex was as well developed as in other patients. It seems to us that this is good proof that the incest-complex is much more a purely regressive production of phantasies than a reality. From this standpoint, the events in childhood are only significant for the neuroses in so far as they are revived later

through a regression of the libido. That this must be true to a great extent is also shown by the fact that the infantile sexual shock never causes hysteria, nor does the incest-complex, which is common to everyone. The neurosis only begins as soon as the incest-complex becomes actuated by regression.

So we come to the question, why does the libido make a regression? To answer it we must study carefully under what circumstances regression arises. In treating this problem with my patients, I generally give the following example: While a mountain climber is attempting the ascent of a certain peak, he happens to meet with an insurmountable obstacle, let us say, some precipitous rocky wall which cannot be surmounted. After having vainly sought for another path, he will have to return and regretfully abandon the climbing of that peak. He will say to himself: "It is not in my power to surmount this difficulty, so I will climb another easier mountain." In this case, we find there is a normal utilization of the libido. The man returns, when he finds an insurmountable difficulty, and uses his libido, which could not attain its original aim, for the ascent of another mountain. Now let us imagine that this rocky wall was not really unclimbable so far as his physique was concerned, but that from mere nervousness he withdrew from this somewhat difficult enterprise. In this case, there are two possibilities: I. The man will be annoyed by his own cowardice, and will wish to prove himself less timid on another occasion, or perhaps will even admit that with his timidity he ought never to undertake such a difficult ascent. At any rate, he will acknowledge that he has not sufficient moral capacity for these difficulties. He therefore uses that libido, which did not attain its original aim, for a useful self-criticism, and for sketching a plan by which he may be able, with due regard to his moral capacity, to realize his wish to climb. II. The possibility is, that the man does not realize his own cowardice, and declares off-hand that this mountain is physically unattainable, although he is quite able to see that, with sufficient courage, the obstacle could have been overcome. But he prefers to deceive himself. Thus the psychological situation which is of importance for our problem is created.

## THE ETIOLOGICAL SIGNIFICANCE OF FAILURE OF ADAPTATION

Probably this man knows very well that it would have been physically possible to overcome the difficulty, that he was only morally incapable of doing so. He rejects this idea on account of its painful nature. He is so conceited that he cannot admit to himself his cowardice. He brags of his courage and prefers to declare things impossible rather than his own courage inadequate. But through this behavior he comes into opposition with his own self: on the one hand he has a right view of the situation, on the other he hides this knowledge from himself, behind the illusion of his infallible courage. He represses the proper view, and forcibly tries to impress his subjective, illusive opinion upon reality. The result of this contradiction is that the libido is divided, and that the two parts are directed against one another. He opposes his wish to climb a mountain by his artificial self-created opinion, that its ascent is impossible. He does not turn to the real impossibility, but to an artificial one, to a self-given limitation; thus he is in disharmony with himself, and from this moment has an internal conflict. Now insight into his cowardice will get the upper hand; now obstinacy and pride. In either case the libido is engaged in a useless civil war. Thus the man becomes incapable of any enterprise. He will never realize his wish to climb a mountain, and he goes perfectly astray as to his moral qualities. He is therefore less capable of performing his work, he is not fully adapted, he can be compared to a neurotic patient. The libido which withdrew from before this difficulty has neither led to honest self-criticism, nor to a desperate struggle to overcome the obstacle; it has only been used to maintain his cheap pretence that the ascent was really impossible, even heroic courage could have availed nothing. Such a reaction is called an *infantile reaction*. It is very characteristic of children, and of naïve minds, not to find the fault in their own shortcomings, but in external circumstances, and to impute to these their own subjective judgment. This man solves his problem in an infantile way, that is, he replaces the suitable mode of adaptation of our former case by a mode of adaptation belonging to the infantile mind. This is regression. His libido withdraws from an obstacle which cannot be surmounted, and replaces a real action by an infantile illusion. These cases are very commonly met



with in practice among neurotics. I will remind you here of those well-known cases in which young girls become hysterical with curious suddenness just when they are called upon to decide about their engagements. As an instance, I should like to describe to you the case of two sisters, separated only by one year in age. They were similar in capacities and characters; their education was the same; they grew up in the same surroundings, and under the influence of their parents. Both were healthy; neither the one nor the other showed any nervous symptoms. An attentive observer might have discovered that the elder daughter was the more beloved by the parents. This affection depended on a certain sensitiveness which this daughter showed. She asked for more affection than the younger one, was also somewhat precocious and more serious. Besides, she showed some charming childish traits, just those things which, through their slightly capricious and unbalanced character, make a personality especially charming. No wonder that father and mother had a great joy in their elder daughter. As both sisters became of marriageable age, almost at the same time they became intimately acquainted with two young men, and the possibility of their marriages soon approached. As is generally the case, certain difficulties existed. Both girls were young and had very little experience of the world. Both men were relatively young too, and in positions which might have been better; they were only at the beginning of a career, but nevertheless, both were capable young men. Both girls lived in a social atmosphere which gave them the right to certain social expectations. It was a situation in which a certain doubt as to the suitability of either marriage was permissible. Moreover, both girls were insufficiently acquainted with their prospective husbands, and were therefore not quite sure of their love. There were many hesitations and doubts. Here it was noticed that the elder girl always showed greater waverings in her decisions. From these hesitations some painful moments arose between the girls and the young men, who naturally longed for more certainty. At such moments the elder sister was much more excited than the younger one. Several times she went weeping to her mother, complaining of her own hesitation. The younger one was somewhat more decided, and put an end to the unsettled situation by accepting

her suitor. She thus got over her difficulty and the further events ran smoothly. As soon as the admirer of the elder sister became aware that the younger one had put matters on a surer footing, he rushed to his lady and begged in a somewhat passionate way for her acceptance. His passion irritated and frightened her a little, although she was really inclined to follow her sister's example. She answered in a somewhat haughty and offhand way. He replied with sharp reproaches, causing her to get still more excited. The end was a scene with tears, and he went away in an angry mood. At home, he told the story to his mother, who expressed the opinion that this girl was really unsuitable for him, and that it would be perhaps better to choose some one else. The girl, for her part, doubted very much if she really loved this man. It suddenly seemed to her impossible to follow him to an unknown destiny, and to be obliged to leave her beloved parents. From that moment, she was depressed; she showed unmistakable signs of the greatest jealousy towards her sister, but would neither see nor admit that she was jealous. The former affectionate relations with her parents changed also. Instead of her earlier childlike affection, she betrayed a lamentable state of mind, which increased sometimes to pronounced irritability; weeks of depression ensued. Whilst the younger sister celebrated her wedding, the elder went to a distant health-resort for a nervous intestinal trouble. I shall not continue the history of the disease; it ended in an ordinary hysteria.

In analyzing this case, great resistance to the sexual problem was found. The resistance depended on many perverse phantasies, the existence of which would not be admitted by the patient. The question, whence arose such perverse phantasies, so unexpected in a young girl, brought us to the discovery that once as a child, eight years old, she had found herself suddenly confronted in the street by an exhibitionist. She was rooted to the spot by fright, and even much later ugly images persecuted her in her dreams. Her younger sister was with her at the time. The night after the patient told me this, she dreamed of a man in a gray suit, who seemed about to do in front of her what the exhibitionist had done. She awoke with a cry of terror. The first association to the gray suit was a suit of her father's, which he had been wearing on an excursion which she made with him

when she was about six years old. This dream connects the father, without any doubt, with the exhibitionist. This must be done for some reason. Did something happen with the father, which could possibly call forth this association? This problem met with great resistance from the patient. But she could not get rid of it. At the next sitting she reproduced some early reminiscences, when she had noticed her father undressing himself. Again, she came one day excited and terribly shaken, and told me that she had had an abominable vision, absolutely distinct. In bed at night, she felt herself again a child of two or three years old, and she saw her father standing by her bed in an obscene attitude. The story was gasped out piece by piece, obviously with the greatest internal struggle. This was followed by violent reproaches, of how dreadful it is that a father should ever behave to his child in such a terrible manner.

Nothing is less probable than that the father really did this. It is only a phantasy, probably first constructed in the course of the analysis from that same need of discovering a cause which once induced the physician to form the theory that hysteria was only caused by such impressions. This case seemed to me suitable to demonstrate the meaning of the theory of regression, and to show at the same time the source of the theoretical mistakes so far. We saw that both sisters were originally only slightly different. From the moment of the engagement their ways were totally separated. They seemed now to have quite different characters. The one, vigorous in health, and enjoying life, was a good and courageous woman, willing to undertake the natural demands of life; the other was sad, ill-tempered, full of bitterness and malice, disinclined to make any effort towards a reasonable life, egotistical, quibbling, and a nuisance to all about her. This striking difference was only brought out when the one sister happily passed through the difficulties of her engagement, whilst the other did not. For both, it hung to a certain extent only on a hair, whether the affair would be broken off or not. The younger one, somewhat calmer, was therefore more deliberate, and able to find the right word at the right moment. The elder one was more spoiled and more sensitive, consequently more influenced by her emotions, and could not find the right word, nor had she the courage to sacrifice her pride to put things straight



afterwards. This little circumstance had a very important effect. Originally the conditions were much the same for both sisters. The greater sensitiveness of the elder produced the difference. The question now is: Whence arose this sensitiveness with its unfortunate results? The analysis demonstrated the existence of an extraordinarily developed sexuality of infantile phantastic character; in addition, an incestuous phantasy towards the father. We have a quick and easy solution of the problem of this sensitiveness, if we admit that these phantasies had a lively, and therefore effective existence. We might thus readily understand why this girl was so sensitive. She was shut up in her own phantasies and strongly attached to her father. Under these circumstances, it would have been really a wonder had she been willing to love and marry another man. The more we pursue our need for a causation, and pursue the development of these phantasies back to their beginning, the greater grow the difficulties of the analysis, that is to say, the resistances as we call them. At the end we should find that impressive scene, that obscene act, whose improbability has already been established. This scene has exactly the character of a subsequent phantastic formation. Therefore, we have to conceive these difficulties, which we called "resistances," at least in this part of the analysis, as an opposition of the patient against the formation of such phantasies, and not as a resistance against the conscious admittance of a painful remembrance.

You will ask with astonishment, to what aim the patient contrives such a phantasy? You will even be inclined to suggest that the physician forced the patient to invent it, otherwise she would probably never have produced such an absurd idea. I do not venture to doubt that there have been cases in which, by dint of the physician's desire to find a cause, especially under the influence of the shock-theory, the patient has been brought to contrive such phantasies. But the physician would never have come to this theory, had he not followed the patient's line of thought, thus taking part in this retrograde movement of the libido which we call regression. The physician, consequently, only carried right through to its consequence what the patient was afraid to carry out, namely, a regression, a falling back of the libido to its former desires. The analysis, in following the libido-regression, does

not always follow the exact way marked by its historical development, but very often rather a later phantasy, which only partly depends on former realities. In our case, only some of the circumstances are real, and it is but much later that they get their great importance, namely, at the moment when the libido regresses. Wherever the libido takes hold of a reminiscence, we may expect that this reminiscence will be elaborated and altered, as everything that is touched by the libido revives, takes on dramatic form, and becomes systematized. We have to admit that, in our case, almost the greater part of these phantasies became significant subsequently, after the libido had made a regression, after it had taken hold of everything that could be suitable, and had made out of all this a phantasy. Then that phantasy, keeping pace with the retrograde movement of the libido, came back at last to the father and put upon him all the infantile sexual desires. Even so it was thought in ancient times that the golden age of Paradise lay in the past! In the case before us we know that all the phantasies brought out by analysis did become subsequently of importance. From this standpoint only, we are not able to explain the beginning of the neurosis; we should constantly move in a circle. The critical moment for this neurosis was that in which the girl and man were inclined to love one another, but in which an inopportune sensitiveness on the part of the patient caused the opportunity to slip by.

*The Conception of Sensitiveness.*—We might say, and the psychoanalytical conception inclines in this direction, that this critical sensitiveness arises from some peculiar psychological personal history, which determined this end. We know that such sensitiveness in a psychogenic neurosis is always a symptom of a discord within the subject's self, a symptom of a struggle between two divergent tendencies. Both tendencies have their own previous psychological story. In this case, we are able to show that this special resistance, the content of that critical sensitiveness, is, as a matter of fact, connected in the patient's previous history, with certain infantile sexual manifestations, and also with that so-called traumatic event—all things which are capable of casting a shadow on sexuality. This would be so far plausible if the sister of the patient had not lived more or less the same life, without experiencing all these consequences. I mean, she did not

develop a neurosis. So we have to agree that the patient experienced these things in a special way, perhaps more intensely than the younger one. Perhaps also, the events of her earlier childhood were to her of a disproportionate importance. But if it had been the case to such a marked extent, something of it would surely have been noticed earlier. In later youth, the earlier events of childhood were as much forgotten by the patient as by her sister. Another supposition is therefore possible. This critical sensitiveness is not the consequence of the special previous past history, but springs from something that had existed all along. A careful observer of small children can notice, even in early infancy, any unusual sensitiveness. I once analyzed a hysterical patient who showed me a letter written by her mother when this patient was two and a half years old. Her mother wrote about her and her sister. The elder was always good-tempered and enterprising, but the other was always in difficulties with both people and things. The first one became in later life hysterical, the other one katatonic. These far-reaching differences, which go back into earliest childhood, cannot depend on the more or less accidental events of life, but have to be considered as being innate differences. From this point of view, we cannot any longer pretend that her special previous psychological history caused this sensitiveness at that critical moment; it would be more correct to say: This innate sensitiveness is manifested most distinctly in uncommon situations.

This surplus of sensitiveness is found very often as an enrichment of a personality contributing even more to the charm of the character than to its detriment. But in difficult and uncommon situations the advantage very often turns into a disadvantage, as the inopportunately excited emotion renders calm consideration impossible. Nothing could be more incorrect than to consider this sensitiveness as *eo ipso* a morbid constituent of a character. If it really were so, we should have to regard at least one third of humanity as pathological. Only if the consequences of this sensitiveness are destructive to the individual have we a right to consider this quality as abnormal.

*Primary Sensitiveness and Regression.*—We come to this difficulty when we crudely oppose the two conceptions as to the significance of the previous psychological history as we have done



here; in reality, the two are not mutually exclusive. A certain innate sensitiveness leads to a special psychological history, to special reactions to infantile events, which are not without their own influence on the development of the childish conception of life. Events bound up with powerful impressions can never pass without leaving some trace on sensitive people. Some of these often remain effective throughout life, and such events can exert an apparently determining influence on the whole mental development. Dirty and disillusional experiences in the domain of sexuality are specially apt to frighten a sensitive person for years and years. Under these conditions, the mere thought of sexuality raises the greatest resistances. As the creation of the shock-theory proved, we are too much inclined, in consequence of our knowledge of such cases, to attribute the emotional development of a person more or less to accidents. The earlier shock-theory went too far in this respect. We must never forget that *the world is, in the first place, a subjective phenomenon. The impressions we receive from these happenings are also our own doing.* It is not the case that the impressions are forced on us unconditionally, but our disposition gives the value to the impressions. A man with stored-up libido will as a rule have quite different impressions, much more vivid impressions, than one who organizes his libido into a rich activity. Such a sensitive person will have a more profound impression from certain events which might harmlessly pass over a less sensitive subject. Therefore, in conjunction with the accidental impression, we have to consider seriously the subjective conditions. Our former considerations, and the observation of the concrete case especially, show us that the important subjective condition is the regression. It is shown by experience in practice, that the effect of regression is so enormous, so important and so impressive, that we might perhaps be inclined to attribute the effect of accidental events to the mechanism of regression only. Without any doubt, there are cases in which everything is dramatized, where even the traumatic events are artefacts of the imagination, and in which the few real events are subsequently entirely distorted through phantastic elaboration. We can simply say, that there is not a single case of neurosis, in which the emotional value of the preceding event is not considerably aggravated through the regression of

libido, and even where great parts of the infantile development seem to be of extraordinary importance, they only gain this through regression.

As is always the case, truth is found in the middle. The previous history has certainly a determining historic value, which is reinforced by the regression. Sometimes the traumatic significance of the previous history comes more into the foreground; sometimes only the regressive meaning. These observations have naturally to be applied to the infantile sexual events too. Obviously there are cases in which brutal sexual accidents justify the shadow thrown on sexuality, and explain thoroughly the later resistance of the individual towards sexuality. Dreadful impressions other than sexual can also sometimes leave behind a permanent feeling of insecurity, which may determine the individual in a hesitating attitude towards reality. Where real events of undoubted traumatic potentiality are wanting—as is generally the case with neurosis—there the mechanism of regression prevails. Of course, you could object that we have no criterion for the potential effect of the trauma or shock, as this is a highly relative conception. It is not quite so; we have in the standard of the average normal a criterion for the potential effect of a shock. Whatever is capable of making a strong and persistent impression upon a normal person must be considered as having a determining influence for neurotics also. But we may not straightway attribute any importance, even in neurosis, to impressions which in a normal case would disappear and be forgotten. In most of the cases where any event has an unexpected traumatic influence, we shall find in all probability a regression, that is to say, a secondary phantastic dramatization. The earlier in childhood an impression is said to have arisen, the more suspicious is its reality. Animals and primitive people have not that readiness in reproducing memories from a single impression which we find among civilized people. Very young children have by no means that impressionability which we find in older children. A certain higher development of the mental faculties is a necessary condition for impressionability. Therefore we may agree that the earlier a patient places some significant event in his childhood, the more likely it will be a phantastic and regressive one. Important impressions are only to be expected from later youth.

At any rate, we have generally to attribute to the events of earliest childhood, that is, from the fifth year backwards, but a regressive importance. Sometimes the regression does play an overwhelming part in later years, but even then one must not ascribe too little importance to accidental experiences. It is well known that, in the later course of a neurosis, the accidental events and the regression together form a vicious circle. The withdrawal from the experiences of life leads to regression, and the regression aggravates the resistances towards life.

In the conception of regression psychoanalysis has made one of the most important discoveries which have been made in this sphere. Not only has the earlier exposition of the genesis of neurosis been already subverted, or at least widely modified, but, at the same time, the *actual conflict* has received its proper valuation.

#### THE SIGNIFICANCE OF THE ACTUAL CONFLICT

In the case I have described, we saw that we could understand the symptomatological dramatization as soon as it could be conceived as an expression of the actual conflict. Here the psychoanalytic theory agrees with the results of the association-experiments, of which I spoke in my lectures<sup>10</sup> at Clark University. The association-experiment, with a neurotic person, gives us a series of references to certain conflicts of the actual life, which we call complexes. These complexes contain those problems and difficulties which have brought the patient into opposition with himself. Generally we find a love-conflict of an obvious character. From the standpoint of the association-experiment, neurosis seems to be something quite different from what it appeared from the standpoint of the earlier psychoanalytic theory. Considered from the standpoint of the latter theory, neurosis seemed to be a growth which had its roots in earliest childhood, and overgrew the normal structure. Considered from the standpoint of the association-experiment, neurosis seems to be a reaction from an actual conflict, which is naturally found also among normal people, but among them the conflict is solved without too great difficulty. The neurotic remains in the grip of his conflict, and his neurosis seems, more or less, to be the consequence of this

<sup>10</sup> Am. Journ. Psych., April, 1910.



stagnation. So we may say that the result of the association-experiments tell in favor of the theory of regression.

With the former historical conception of neurosis, we thought we understood clearly why a neurotic person, with his powerful parent-complex, had such great difficulty in adapting himself to life. Now that we know that normal persons have the same complex, and in principle have to pass through just the same psychological development as a neurotic, we can no longer explain neurosis as a certain development of phantasy-systems. The really illuminating way to put the problem is a prospective one. We do not ask any longer if the patient has a father- or a mother-complex, or unconscious incest-phantasies which worry him. To-day, we know that every one has such things. The belief that only neurotics had these complexes was an error. We ask now: What is the task which the patient does not wish to fulfil? From which necessary difficulties of life does the patient try to withdraw himself?

When people try always to adapt themselves to the conditions of life, the libido is employed rightly and adequately. When this is not the case, the libido is stored up and produces regressive symptoms. The inadequate adaptation, that is to say, the abnormal indecision of neurotics in face of difficulties, is easily accounted for by their strong subjection to their phantasies, in consequence of which reality seems to them, wholly or partly, more unreal, valueless and uninteresting than to normal people. These heightened phantasies are the results of innumerable regressions. The ultimate and deepest root is the innate sensitiveness, which causes difficulties even to the infant at the mother's breast, in the form of unnecessary irritation and resistances. Call it sensitiveness or whatever you like, this unknown element of predisposition is in every case of neurosis.

*(To be continued)*

## PSYCHOANALYSIS AND HOSPITALS<sup>1</sup>

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Psychoanalysis is only just beginning to be respectable. Time was, and not so very long ago, when a doctor of medicine could not have been convinced that any therapeutic value whatever should be accredited to psychological endeavor. But times have changed, and psychology itself is seeking to prove its right to existence by "applying" itself to "human" problems. It is significant that the greatest modern advances in psychology have come through the work of medical men, who first and foremost are "humane." Psychoanalysis has evolved out of an endeavor to alleviate and cure hysteria. It has finally proved itself to be a source of scientific insight of the most extensive sort, as well as a therapeutic process of the greatest importance. It is because psychoanalysis is primarily one method of therapy that it has its own proper function to fulfil in hospitals.

Seven years ago was established the first Social Service Department in any hospital, and since then the work has proved itself so important that to-day no really first-class hospital could consider itself complete without a social service department.

As the social conditions under which a patient lives have been found to be of such importance in the successful treatment of some diseases (nay, one might say *all*, instead of some, because what is the significance of nurses, or hospitals, if it is not that they create a social situation more favorable than common, to recovery?), so it has been found that the psychological condition of the patient is also of the utmost importance to his recovery.

Institutions arise as a result of human need and desire: hence hospitals, churches, schools, charities, etc., but no one institution

<sup>1</sup> Read at the annual meeting of the American Psychoanalytic Association, May 9, 1913, Washington, D. C.

is, or can be, sufficiently comprehensive to minister to all the needs of that marvellously complex mechanism, the human being. Nevertheless an institution like a hospital should endeavor to help *all* sick persons, and this it is doing, more comprehensively, through the establishment of social service departments; and now a further step has been taken in the appointment of psychologists, whose function it is to study the mind and mental attitude of appropriately selected patients. Thus, at last, the "whole" man, bodily, mental, and social, may receive help.

So far as the hospital itself is concerned, this adding of another department is adding but another burden to an organization already pledged to herculean labors. For the psychoanalyst, this willingness of the hospital to let him work in it relieves him of all purely medical responsibility. He can give his whole attention to psychological problems in their relation to sickness and its symptoms, assured that the patient is at the same time safeguarded and is receiving the best medical attention possible. Even for the psychoanalyst who is also a doctor of medicine, the possibility of immediate consultation with the best medical specialists and experts is of the greatest value in complicated cases. And we are beginning to recognize the fact that some cases really are very complicated indeed and cannot be subsumed under any single, simple scientific formula. Thus while adding a department of psychology and psychotherapy to the hospital is adding another burden, it is of the greatest advantage to individual patients, and, relieved of medical responsibility, a great opportunity to the psychologist.

Patients are ordinarily divided into three classes—medical, surgical, and mental. But there are borderland cases, like those of hysteria and the psychoneuroses, which may be medical, surgical, and mental, all at once. Obviously, if they are to be successfully treated, they must be treated in this threefold manner: *all at once*; any one kind of treatment alone is insufficient. For instance, in one case where a patient developed a high temperature, lasting five or six weeks, during a psychoanalysis, it was necessary that all known medical methods of testing for infections, such as the Widal test, blood cultures, etc., should be made, to guard against a disease that might mean death. In this patient's case it turned out that the temperature was hysterical, but



it was of the greatest value to rule out other possibly more dangerous causes. This same patient, at another time, was paralyzed for several months, during which time she needed, and had, the best of medical attention and care. Another patient had been treated medically and surgically, a great deal, at various hospitals, without its being recognized that her trouble was almost wholly hysterical. Finally she began sticking broken pins and needles in herself, during dream-like states. This required both surgical and psychological treatment to be carried on simultaneously. Where could that be done so well as in a hospital? Another case which required hospital care and psychoanalysis, was that of a patient who had cut herself some twenty-eight or thirty times, and who came to the hospital with a wound which needed surgical attention. Surgical attention alone, however, was not adequate to prevent further self-mutilation, which had already covered a period of about three years. In the past such a case would probably have been regarded as insanity and the patient sent to an asylum. Psychological analysis, however, revealed the mental origin of the cutting, and since then the cutting has stopped.

There are other cases which do not need to stay at hospitals, but who come to the out patient department, and who need at least a modified psychoanalysis,<sup>2</sup> as Dr. Taylor has shown, if they do not need a complete one. Such a case is the following. This patient came to the hospital complaining of persistent vomiting, sometimes nauseated and sometimes not. She also said her back ached near the base of the spine and at the waist line. She had a pain at the base of her brain. A physical and neurological examination proving negative, the diagnosis of psychoneurosis was made and I was asked to make a psychoanalysis.

A comparatively few interviews brought out the following story. The patient's mother died when she was about twelve, and as her father was a drunkard, she was cared for by a society. They got a home for her. After she had been there about four months, the man of the house began to hold her in his lap, caress and fondle her, told her he loved her, then began to masturbate her, and finally attempted coitus. After this he had cohabitation with her a number of times, always with the assertion of love, and telling her he was protecting her, as other men would not be care-

<sup>2</sup> Possibility of a Modified Psychoanalysis, by E. W. Taylor, M.D., *Journal of Abnormal Psychology*, Feb.-March, 1912.

ful and would not hesitate to impregnate her. She lived here three and a half years, and then went to another "home," where the man of the house did the same thing a *few* times, because she was there only a short while. She was sent to a farmer's two summers, and here she went through the same experiences, the last being less than a month before I saw her. Her immediate fear, repressed, was that she might be pregnant. Confessing these things, and with a little encouragement, the patient went back for her final year at the high school, where she is doing splendid work. For nearly a year and a half now there has been no trouble whatever.

Another case which was amenable to a superficial psychoanalysis is the following:

The patient, a girl of twelve, came to the hospital first, February 25, 1908. In the words of the hospital record: For the last six months, has had pains in right side. One week ago seen by doctor outside, and diagnosed appendicitis. Has had some constipation—chills always, feverish at times of attack—has acute nephritis following scarlet fever. Referred to Med. for general examination.

Ex. Heart normal. Abdominal tenderness, R. iliac. Urine: albumin, trace; shows chronic nephritis in sediment.

March 11, 1908. Severe pain in lower right abdomen, on walking; no vomiting. Bowels regular with physic; no dizziness; no headaches.

March 21. Admitted to house.

April 13. Discharged. Acute appendicitis much relieved.

November 10, 1911. Since operation has been having recurrent attacks of pain—every 2-6 weeks. Pain preceded for two days by numbness in legs. When very acute thinks pain in right side of abdomen, which doubles her up. Screams with pain. Sometimes is sleepy with attack and loses consciousness, although she usually knows people are around. Twice has vomited. Abdomen is bloated in attack. No change in urine noticed, either quality or amount. Digestion O. K. Bowels constipated. Has had headache for three months.

March 21. Pain often preceded by looseness of bowels.

Has had for five years attacks of abdominal pain always preceded by numbness of right leg from ankle to knee; this may last

from ten minutes to a week and rarely comes without being followed by pain. She drags her foot when she has numbness. Twice has lost consciousness with this pain. Pain may come once a week, and she may go two months without it. There is nausea, but no vomiting. There are no headaches. K. J. and plantars normal; sensations normal.

November 22. Psychoanalysis begun.

November 23. Holding urine lessened.

December 6. Has had no attack.

December 20. Had a little pain, with no numbness, a few days ago. The pain followed retention of urine during a Latin test. Passing it at recess relieved her.

The second day of the analysis it was found that some time before the patient had been warned against using public closets lest she get some contagious disease. She had an unusual capacity for retaining her urine, and following this warning she had got into a habit of retaining her urine unnaturally long. This was followed by some pain and other symptoms mentioned above. When the patient understood this, and took care to relieve herself, she was also relieved from some of her symptoms.

This is obviously only a most superficial analysis, but for practical purposes it was sufficient for the time.

It seems to me that in psychoanalysis, as in surgery, the seriousness of the symptoms is the criterion of the radicalness of the attempts made to relieve them. Following Freud, the criterion of seriousness is the extent of social disability, not the discomfort alone of the patient. There are all sorts of complications. In this case the parents had to be considered. Practically one has to be content, often, with superficiality. In this connection, I think Freud's paper on "Wilde Psychoanalyse" in No. II, Zentralblatt, is of the highest importance.

A point in this connection it seems well to emphasize. Too sudden knowledge blasts instead of heals. You all remember Ibsen's Wild Duck. Tempering the wind to the shorn lamb is absolutely necessary in psychoanalysis. Perhaps the best way to do this is to move only *gradually* from the most general terms to the more specific commonly-used terminology. Psychoanalysis must at least be managed as delicately as lumbar punctures, drawing blood, or other forms of surgical interference.



There is a very important fundamental question to be settled before one permits himself to become dogmatic. Is *knowledge*, full and complete, the end to be aimed at in a psychoanalysis? Freud evidently does not think so, because his criterion of sickness is not ignorance but uselessness, and further, he says, that sometimes it is better to leave a neurosis as it is, rather than try to cure it, because it is the best practical solution of an unbearable situation. Hence, for Freud, not knowledge, but usefulness and serviceableness to society is the end and purpose of a psychoanalysis. Thus a restoration to society and social usefulness signals the practical completion of an analysis.

There are two ways of successfully meeting psychic traumas and psychic conflicts: one is a successful repression; the other is conscious suppression and sublimation. Even after an analysis has shown the actual conflicting complexes, there remains the actual conflict, though now conscious, where before it was unconscious. Thus, if we have been fighting an enemy in the dark, the discovery of the enemy does not necessarily mean that the fight is won.

The solving of the medical problem leaves one on a moral level. There still remains the ethical problem to be solved; and according to William James, that is the essence of the problem of philosophy. But to discuss these questions further will take me beyond the limits of this paper.

It might be thought that to do a psychoanalysis in the out-patient department of a hospital would be a practical impossibility. To get the patient to return might seem impossible. Frequent interruptions seem difficulties. And Freud brings up the question of free treatment and its disadvantages. So far as my experience goes, it is not at all difficult to get the patient to return. I have had patients come repeatedly from out of town, for benefits that at first must seem highly problematical. Undoubtedly, the rapidly formed *Übertragung* is largely responsible for this.

At first I was much disturbed by interruptions, but as the work went on I noticed that the patient was herself not cognizant, so far as I could tell, of such interruptions as are frequent in the examining rooms of an out-patient department. I explained this by the patient's *almost absolute self-absorption*.

The question of free treatment is certainly important. I am

inclined to take issue with Freud on this point. The relation between patient and psychoanalyst is purely personal, and only if the patient is very rich is it of no importance to him as to how long his treatment is to continue. While, on the other hand, if the analyst gets a fee for every interview, it is to his interest to keep the thing going as long as possible. Any such motives, unconscious, would be fatal to a successful treatment, but conscious, they still have a certain power to interfere. A much more serious objection to hospital psychoanalysis seems to lie in the number of doctors in charge of the patient. Conflicting Übertragungs and jealousies might seem to make it impossible to carry on any successful psychoanalysis. If different physicians really tried simultaneously to psychoanalyze a patient, such interference would make it impossible. The patient would play one physician against the other. But where only one is doing the psychoanalysis, and the others are attending strictly to the medical or surgical aspects of the case, there is no conflict, because such work may be done entirely impersonally and independently of any psychological complications, which can then be handled psychoanalytically and independently of the other complications. This may look like specialization gone mad, but it really is forced by the complexity of the case. Symptoms that seem somatically serious, having been diagnosed as hysterical, for instance, are no longer important, as symptoms, but what is important is the origin of these symptoms and here lies the importance of psychoanalysis. Psychoanalysis seeks for psychic origins and causes, and, as far as possible, seeks to cure the patient by meeting psychic disturbances with psychic treatment. At bottom this is really elementary moral instruction and training.

There is, however, one real difficulty confronting a psychoanalysis in a hospital; that is the lack of occupation for the patient. Perhaps no more important contribution has been made than Freud's demonstration of the necessity for sublimation if psychoanalysis is to be successful therapeutically. Life energy must have some outlet, or it will damage, if not destroy, its possessor. Here is the secret of some successes and the explanation of some failures of psychoanalysis. And it explains some of the difficulty in other cases.

There is a class of patients who try to use the hospital in an

illegitimate way. For instance, I know of a case where free board and lodgings were undoubtedly a powerful motive militating against speedy recovery from a real, but relatively mild, psychoneurosis. Another case I know of was where the patient tried to get the social service department to buy her a new shirt-waist. This patient was a strong, well-formed woman, who refused to work, but let her mother, a woman nearly sixty years old, sew in a tailor's shop all day for the only income the family had. Such patients do not take kindly to psychoanalysis and refuse to keep it up.

In any psychopathic hospital there is, of course, a ward for disturbed patients. Here there are more nurses, and closer watch is kept upon each patient. In the case of the patient who symbolically masturbated herself by inserting broken pins and needles in her breast, a closer watch was desirable to prevent, if possible, the act. It would seem as if such an environment would be very bad for an hysteric. On the contrary, it was found that the stricter discipline was most salutary; not only in this case, but in another case where the patient bit her wrist badly, in a dream-like state, under the impression that if she bit her hand off she could no longer masturbate, a habit she was trying to break. The presence of other mentally far more deeply disturbed patients had not the slightest demonstrable ill effects. I am almost inclined to think that any patient suffering from an hysteria serious enough to make hospital treatment desirable, even if not necessary, would respond better to treatment just because she saw the logical end of the loss of mental self control. Whereas, a patient associating with other patients more nearly normal, enters into undesirable intimacies, sympathetic self-pitying, and more or less maudlin sentimentality.

Thus the common opinion that an hysteric is undisciplined and could control herself if she chose receives a certain degree of corroboration. Objective, impersonal discipline is perhaps one of the most powerful therapeutic agencies we possess.

Another function psychoanalysis has in the hospital, besides being a therapeutic process (primarily a therapeutic process), is as a method of scientific research. Scientific research, like everything else human, has finally to be judged by pragmatic tests, and so far as a hospital is concerned that is, of course, its value to



therapeutics. This value, of course, may be either immediate or remote, it must be either immediate or remote. If remote, it shows at least where the trouble lies, and if we know *what* the trouble is, that is at least one step towards curing it, or at any rate, it prevents the waste of effort in useless attempts to do the impossible. Such a saving of useless effort is illustrated by a case I have already spoken of. This hysterical girl had contractures of her legs and hips which were treated by weights and pulleys, plaster casts, bandages, and an operation even was about to be performed when suddenly the contractures were released, thus stopping the surgeon's knife just in time. In such cases the importance of ruling out hysteria is about as great as ruling out other forms of disease. Another case reported above shows that an appendectomy was performed on an hysterical girl, and that almost certainly the pain was not due to appendicitis. I imagine that a large number of perfectly good appendices have been removed from hystericals. We all know, too, the crimes of hysterectomy.

Perhaps the greatest value of psychoanalysis to the hospital lies in its opportunity to demonstrate the protean and deceptive forms of the symptoms of hysteria simulating so successfully the symptoms of organic diseases that unless one were consciously on the watch one could most easily be misled. Symptoms that have been treated medically and surgically, which later can be demonstrated to be hysterical, not vaguely, but with adequate cause, with theoretically valid etiology, are of the greatest use in future differential diagnoses. The power of hysteria to imitate pathological processes is incredible previous to empirical experience, and while the text-books tell of such cases, one naturally is inclined to imagine them as really bizarre, infrequent and foreign, peculiar perhaps to Paris or Berlin, but not to Boston or New York. The concrete solution of such psychoneurotic problems has a convincingness otherwise unobtainable. Finally it will become a routine to look for hysterical symptoms as well as organic symptoms, in any endeavor to make a differential diagnosis. That this is important has been already shown by the case of the hysterical patient who had years of unavailing surgical and medical treatment. Not that this is any reproach on the treatment she did get, it was the best that could be had at the time.

Investigations carried out not merely for the purpose of scientific research, may prove of immense value in a negative way if not positive. They may help to save us from making in the future irreparable blunders. But, more positively, scientific research may be of the utmost importance for the next generation, if not for this. Conditions that have gotten so bad we cannot really cure them for the particular individual, may, if we know how they came about, be avoided by others. Here, perhaps, is where the hospital is of the greatest value to the psychoanalyst. The world and nature perform experiments on human beings which we would never under any circumstances be warranted in consciously performing. The results are seen in pitiful abundance in every hospital. The causes may often be discovered by psychoanalysis. And while the knowledge may be too late to help the individual much, it may help others from falling into the same errors.

## THE DREAM AS A SIMPLE WISH-FULFILMENT IN THE NEGRO

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The investigator of dream states in this country has at hand a race whose psychological activities are certainly less complex than those of the Caucasian and whose dreams therefore must be simpler in type. I refer, of course, to the American negro, and especially to the so-called pure-blooded negro.

It is not my intention in this paper to discuss pro or con the existence of an individual or number of individuals of unmixed African descent. While it is quite conceivable to my mind that four or five generations of a race can exist in an alien country without necessarily receiving an admixture from their environment and while I fail to see how such a generalization as that made by Witmer<sup>1</sup> and others can be satisfactorily proved in a race so widely distributed and so great quantitatively as the American negro, I will admit that a large proportion of this race is diluted to a greater or less extent with the polyglot nationalities with which it has come into contact since 1620. Perhaps only a small percentage, or it may be none, of the negroes whose dreams are recorded below, were of pure African blood. The admission of this assumption would affect in no way the fact that the student of psychology working in the United States has access to a people the average level of whose development is lower than the white race and which furnishes numerous individuals showing psychological aspects quite similar to those of the savage.

This being the case, it is to be expected that their dream life would enjoy a relative freedom from the endo-psychic censor, exactly as that of the child does. Freud says:

" . . . under the most complex conditions, dreams are formed

<sup>1</sup> Witmer, A. H., "Insanity in the Colored Race in the U. S.," *Alienist and Neurologist*, 1891, XII.



which can be understood only as fulfilments of wishes, and present their contents without concealment. In most cases, these are short and simple dreams, which stand in pleasant contrast to the confused and teeming dream compositions which have mainly attracted the attention of the authors. The most simple of all, I suppose, are to be expected in the case of children, whose psychic activities are certainly less complicated than those of adults. The psychology of children, in my opinion, is to be called upon for services similar to those which the study of the anatomy and development of the lower animals render to the investigation of the structure of the highest class of animals. Until now only a few conscious efforts have been made to take advantage of the psychology of children for such a purpose.

"The dreams of little children are simple fulfilments of wishes, and as compared, therefore, with the dreams of adults, are not at all interesting. They present no problem to be solved, but are naturally invaluable as affording proof that the dream in its essence signifies the fulfilment of a wish."<sup>2</sup>

For the purpose of verifying this supposition, I obtained the dreams of one hundred negroes, selecting only those who were pure-blooded to the best of the information obtainable on the subject. While of course this did not necessarily mean that they were of absolutely unmixed Ethiopian blood, still it is probable that they had less white blood in them than those who admitted a dilution. It might be mentioned in passing that those negroes who claimed no white ancestry were almost invariably the ones whose skins were heavily pigmented and who bore certain physiognomic characteristics such as kinky hair, wide, flattened nostrils and heavy, everted lips.

A few general characteristics of these dreams may be of interest before proceeding to the citation of examples. Eighty-four of the hundred were frank expressions of wish fulfilment, the other sixteen were more complex. The eighty-four were in fifty-two instances, the brief expression of a single idea, the other thirty-two presented the wish more in detail. In none of the eighty-four could distortion, condensation, latent content or secondary elaboration be determined. No associations could be obtained to the dream content, the dreamer simply recognizing the

<sup>2</sup> Freud, S., "The Interpretation of Dreams," p. 107.

dream picture as a faithful visual representation of a wish which he had been obliged to suppress. A great many of the dreams were either, "*I dreamed that I was out*" or "*I dreamed that I saw myself outside*," these cases being confined at the time of examination in the District Jail at Washington, D. C. Many more were, "*I dreamed I had lots of money*," the wish and the repression being quite obvious in these cases. A few dreams, taken at random from the collection follows:

W. W. Age 87 years; education poor.

Dream No. 1. "*I dreamed I was going to get my pension.*"

This dreamer has for years been endeavoring to obtain a pension from the government, although he has no actual disability to entitle him to such. It forms the usual subject of his conversation, and he has admitted in relating the dream that it was what he had often wished in his conscious life.

J. S. Age, 30 years; education, 5th grade public school; occupation, driver. This negro had been in jail sixteen days, serving sentence for disorderly conduct when he was interviewed.

Dream No. 2. "*I dreamed several times when I first came here, that I was out.*"

This dreamer is unable to give any more particulars about this dream; the wish-fulfilment is obvious.

G. J. Age, 39 years. This individual who is a laborer, can read and write but has no other education. He was examined the day he arrived in jail, to serve a sentence of ninety days for disorderly conduct.

Dream No. 3. "*I dreamed several times I had money—five, ten or twenty dollars.*"

Patient adds voluntarily the statement, "I wake up and find I don't have anything," showing he recognized the wish-fulfilment himself. Further questioning of him reveals the fact that five dollars represents a large sum of money to him, and he has never had as much as ten dollars together at one time.

C. H. Age, 24 years; piano mover by occupation; went to school to 7th grade.

Dream No. 4. "*I dreamed I had fifty or sixty dollars.*"

He was surprised to wake up and find nothing. Here again the dreamer recognizes the wish-fulfilment. He is questioned as

to the value of this amount of money and it seems that with it he would be able to purchase all that he desires at present.

M. B. Age, 25 years; laborer by occupation; education, 5th grade. When this negro was examined, he was spending his eighth day in jail, awaiting sentence for assault.

Dream No. 5. *"I dreamed I was out. The police went one way and I went another."*

This may be classed as a retrospective wish-fulfilment. It is of course the reverse of what actually happened when he was arrested.

A. F. Age, 27 years; laborer by occupation; able to read and write but nothing else.

Dream No. 6. *"I dreamed I had plenty of money."*

He says he had this dream a number of times. He is not able to elaborate it at all.

J. C. Age, 23 years; laborer by occupation; can read and write but has no further education. When this negro was examined, he had been 110 days in jail and had seven more days to serve of his sentence. He could recollect no recent dreams, but said when he first came to the jail—

Dream No. 7. *"I dreamed a number of times that I was out for a good time with the girls."*

E. H. Age, 32 years; laborer by occupation. He was examined the fifteenth day of a sixty day's jail sentence.

Dream No. 8. *"I dreamed last night I was out drinking and playing music."*

It develops that this negro plays the piano well by ear and his favorite amusement when at liberty is playing the piano for a cheap dance, receiving therefor a dollar or two and a few drinks.

A. W. Age, 39 years; barber by occupation. He can read and write but has no further education.

Dream No. 9. *"I dreamed several times I had all the money I wanted."*

G. L. Age, 19 years; driver by occupation; education, high as the 4th grade. This negro had been in jail five months and nine days when he was examined. He had had a number of dreams.

Dream No. 10. *"I dreamed I had thousands of dollars."*

He was questioned as to what one thousand dollars repre-



sented to him. He said he could live his whole life without work for a thousand dollars.

Dream No. 11. "*I dreamed two or three times I saw myself out on the street.*"

The wish-fulfilment here is obvious. Also he says,

Dream No. 12. "*I dreamed two or three times the jury acquitted me.*"

It will be noted that in several of the above dreams, the dreamer simply thought he was released from undesirable situations. Nearly all of these dreams were obtained from negroes in jail, and a score more could be cited where the dream content was simply, "*I dreamed I was out.*"

Regarding this, Freud says:

"... adults will often under certain conditions show dreams of an infantile character. . . . On the other hand, it seems that dreams of an infantile type reappear especially often in adults if they are transferred to unusual conditions of life."<sup>3</sup>

It is interesting also to observe that defective negroes and also those with simple deteriorating psychoses, show the same simple expression of a wish-fulfilment in their dreams. It is probable, of course, that a similar condition would obtain to a lesser degree in white patients, and I propose later to seek to corroborate this.

Fifty colored patients were examined in the wards of the Government Hospital for the Insane, in reference to their dream activities. Fourteen of the number were unable or unwilling to give any dreams. Eight of those who related dreams, gave dream pictures which were more complex in type; the remaining twenty-eight gave dreams which are simple wish-fulfilments. A few of these will suffice for illustration:

T. G. Age, 37 years. A low-grade imbecile, claiming to have no white blood. He has been four years in the hospital.

Dream No. 13. "*I dreamed I was out having a fine time.*"

This patient says he has had this dream at least a hundred times.

G. B. Age, 18 years; hebephrenic præcox; has a fairly good education.

Dream No. 14. "*I dreamed I saw a moving picture show.*"

This patient explains that this was his favorite form of amuse-

<sup>3</sup> Ibid., p. iii (footnote).

ment before his admission to the institution and during the day-time he often imagines himself a spectator at one of these entertainments.

W. B. Age, 41 years; hebephrenic præcox; no education.

Dream No. 15. *"I saw a lot of money—five and ten dollar bills flying through the air, and I was catching them."*

As is common in individuals of his social condition, the denominations mentioned above represent the potential acquisition of a considerable amount of worldly goods.

B. W. Age, 19 years; hebephrenic præcox; fair education; sailor by occupation.

Dream No. 16. *"I dreamed I was back on my ship."*

Patient is unable to elaborate this at all, but it is evident that this is the wish he has constantly in his mind.

C. N. Age, 65 years; a low-grade imbecile.

Dream No. 17. *"I dreamed I was home last night."*

Patient states this is a dream he has frequently, and it was a wish he often had in waking life.

The above examples could be multiplied indefinitely if it were necessary, but it is within the power of any investigator to verify for himself the occurrence of these dreams of a juvenile type in negroes. If we accept unreservedly Freud's dream theory, especially the essence of it, that a dream represents a wish-fulfilment and that wherever it is not immediately recognized as such, the activities of the censor are responsible, we must admit that the colored race fails to show this distorting activity; consequently their psychological activities are analogous with those of the child, and investigation of them might prove of considerable value in studying the genesis of the psychoses. On the other hand, if we admit that their psychology is of a primitive type, we have at least so far corroborated Freud's dream theory as to show that the dreams of individuals of primitive mental processes represent the frank expression of a wish-fulfilment. Although Freud has recommended the study of child psychology as a valuable aid to the understanding of abnormal adult psychology, it must be remembered that in his country there is no such race as we have here whose psychological processes are simple in character and so readily obtainable. Perhaps to the American investigator, the negro might prove as valuable and more accessible than the child.

## TECHNIQUE OF PSYCHOANALYSIS

BY SMITH ELY JELLIFFE, M.D., PH.D.

*(Continued from page 186)*

A further small series of this group is found frequently among the well-to-do. They are not parasites in the sense of the word just used. They may be independent financially, but are en-crusted by the usages of their social milieu and are analyzed with great difficulty. The democratic attitude of psychoanalysis, its pragmatic and humanistic tendencies run counter to their aristocratic, rationalistic and individualistic mode of education. They are very indolent. Novel reading, drug taking, alcoholism and social fussing constitute their most frequently used pathways to escape from being bored to death; while auto-erotic fantasy, sexual tittle tattle, definite liaisons or perversions may be the sole excitements that apparently give any value to life.

They buy attention with their money; look for flattery and self indulgence, and utilize the physician as a blind for the carrying out of their desires. They expect to be told to do the proper thing in "cures." If their set goes to Carlsbad or Hot Springs they expect their medical advisor to know the present styles in sanatoria, health resorts, etc., and use his prescription as a lever to move obstacles, if such exist. Psychoanalysis is far too serious and circuitious a method to interest them beyond that which may have previously stimulated their curiosity regarding its so-called "sexual sniffing." Since in actual psychoanalytic practice no such thing exists such patients as a rule lose interest and move on to a "new" medical interest that will amuse them.

(b) The group of patients for whom psychoanalysis would be more disadvantageous than advantageous is difficult to outline; yet for the beginner certain patients are best let alone. The advantages to be gained are doubtful.

I would place in this series those individuals who do not seriously take up the subject. They may be somewhat sick but out



of motives chiefly of curiosity, they embark on a psychoanalytic procedure, but soon fall by the wayside by reason of the time needed, the cost, or the mental application. They may start in all sincerity but they are more or less superficial natures who tire readily and "do not see the use." They are unwilling to go through the process of mentally dissolving themselves in order to obtain a sometimes unflattering likeness of themselves.

Many narcissistic individuals belong to this group, which will be discussed later.

(c) One may read in the form of general statements made by a number of critics of the *harm* that psychoanalysis may do. These critics are all in accord in denying to the sexual any etiological significance, yet strangely enough psychoanalysis, thought of by them as dealing solely with sex matters, can do the very thing that they say is impossible for sexual ideas to produce. Exact details are not available, and one awaits the analysis of Hoche's<sup>1</sup> anti-psychoanalytic questionnaire, which was launched in 1913 with all of the signs of an active partisanship. The three histories quoted by him are ludicrously inadequate. This is not the place chosen to discuss the various objections to the psychoanalytic procedures, or to the hypothetical concepts that underly them; these will be taken up in the separate paragraphs of this series.

It may readily be admitted that bad psychoanalysis exists, and that such can do harm; but there is much bad medicine and bad surgery evident wherever one may wish to turn. Meddlesome surgery is a by-word—so may meddlesome psychoanalysis become one. Freud has already fully discussed what is well termed "Wild Psychoanalysis,"<sup>2</sup> a paper that all aspirants to psychoanalytic understanding should thoroughly know.

Even the harm done by "bad psychoanalysis" may not be as great as that done by a "good neurologist," who as a result of an examination of a patient with a neurosis gives a learned diagnosis, lays down minute rules as to diet, regimen, hydrotherapy, etc., and

<sup>1</sup> "Ueber den Wert der Psychoanalyse," *Archiv. f. Psychiatrie*, Vol. 51, 1913, p. 1055; "Eine psychische Epidemin unter Aerzten," *Med. Klinik.*, 1910, No. 26.

<sup>2</sup> "Selected Papers on Hysteria and Other Psychoneuroses," *Nervous and Mental Disease Monograph Series*, No. 4, 2d ed., Chapter XI.

yet is oblivious to the dynamic factors of the disorder under consideration. The analyst may have set up a strong antipathy, yet, because it contains a real element of dynamic interpretation, it may ultimately work out unconsciously to the patient's good, whereas the learned diagnosis, which often is nothing more than the analysis of the *acquired meaning of a word*, may shut the door to a minute investigation of the *behavior of a thing*, and the patient, under rationalistic dogmas, is treated for one series of symbols after another, yesterday, uric acid, to-day, gastro-intestinal toxemia, tomorrow, dental sepsis and all without essential relief.

Beginning analysts should avoid working with hysterical young people; they should not attempt a compulsion neurosis without some experience, and only after considerable work will an analysis of a beginning dementia præcox fail to perhaps temporarily increase the patient's excitement. Most harm may come to the analyst himself. With paranoid præcox, or certain of Kraepelin's paraphrenic group<sup>3</sup> the untrained analyst is liable to establish a negative transference and later actual violence may be directed against him.

A similar state of affairs may result from the analysis of certain compulsive states, and the analysis of homosexual situations is best let alone by the beginner for closely related reasons.

With reference to compulsion neuroses, the beginner should be on his guard against taking on free cases. These patients are analyzed with great difficulty; they take an immense amount of time, spread over many months, and unless the analyst is prepared to make a complete analysis independent of personal sacrifice, he is wiser not to embark upon one. If he is compelled by stress of economically more important work to neglect the patient, especially if he be a male—usually all with strong homosexual components in their libido,—he is liable to set up negative transferences, and the patient is apt to curse the analyst right royally. One trained in psychoanalysis recognizes that after all behind this vituperation in the unconscious their lies a very great regard for the analyst so inveighed against, but such patients' utterances when heard by others constitute a large part of the as yet detailed

<sup>3</sup> See Singer, "Kraepelin's Concept of Dementia Præcox," *Journal Nervous and Mental Disease*, June, 1914; Kraepelin, "Lehrbuch," 8th ed., Endogene Verblödung, 1913.

evidence against the value of psychoanalysis. Still the analyst who has committed this fault out of his sympathy for one in great distress, should know that he is liable to harm himself the most. He rarely harms his patient, although the stupid outsider is apt to take it as a great faux-pas on the part of the analyst.

Particular dangers surround the analysis of young girls suffering from hysterical attacks, especially when such represent distorted erotic fantasies, or when the hysterical symptom serves as a direct sexual (in the narrow sense) gratification, and represents a part of the sexual life of the individual. Here a very strong transference is apt to result which often contributes new symptoms to the neurosis. The development of such new symptoms serves to emphasize the necessity for not continuing an analysis, or for putting it in the hands of a woman physician trained in analysis.

Psychoanalysis, even of a most careful kind, at times does harm to the analyst as well in many such cases. The almost pathological transference causes the patient to interfere with the analyst's time, and when she is rebuffed, strong resistances develop and the hysterical patient becomes an active enemy to the physician. She talks about him continuously; discusses all his affairs, particularly how he tried to misuse her (her own non-realized wish-fulfilment). She carries gossip and scandal wherever she can get an opportunity, and may be able to place the analyst in a very unpleasant position.

In justice to many hysterical patients however it should be said that bad psychoanalysis cannot hide behind even this well recognized situation. In the majority of instances, the analyst has been partly at fault in creating such a condition. He may fail in his duty, and succumbing to his own weaknesses, redouble the patient's erotic fantasies by excessive tenderness. He thus creates new situations which involve him as well as his patient in the greatest difficulties.

One not infrequently finds that a certain group of patients unconsciously start out with the idea of getting the analyst "interested" in them. They then slowly or rapidly substitute one group of symptom symbols, usually at first highly resistive by their opposites, namely great solicitude and interest in the analyst and his work. They unconsciously flatter the analyst and finally



may succeed in getting the upper hand. The psychoanalytic probe can no longer do its work. The analyst is powerless. He has perhaps succumbed to his own (auto-erotic, money) complexes, and his usefulness is seriously hampered.

This type is seen particularly in families where the father is somewhat of a tyrant. Notwithstanding a violent conscious antipathy on the part of the daughter to the father the dreams are apt to show definite father image phantasies and the "postitution complex" is fairly well marked. The girl is usually willful and spoiled; usually gets a poor education and thus with but few libido channels open usually turns to social forms of exhibitionism, oftentimes very ingeniously masked, and becomes an accomplished breaker of hearts. Those with strong father incestuous phantasies are very inconstant. They are the Kipling Vampires. Psychoanalysis makes them even more dangerous since they learn better to conceal their "cat and mouse" game. When beauty, wealth and social position are combined the analyst who establishes strong transferences must be specially on his guard.

If the analyst will realize that even every transference contains a strong resistance, and that he, the analyst, is only a surrogate for the father or brother image of the infantile libido of the patient, it should serve to keep him from losing sight of the main object of a psychoanalytic cure, *i. e.*, the making of the patient free and independent.

It must always be borne in mind by the analyst that the psychoanalytic method develops special means by which strong transferences are set up, just as in hypnosis similar transferences may be seen, but in a much more limited group of cases. It also should provide the analyst who is conscientious in his work with special means for handling these usually very strong transferences which are seen in all types of neurotics.

That which is true of hysterical states is doubly so with manic depressive psychoses. These are dynamite bombs and may cause much anxiety to patient as well as analyst. In a number of instances the results of even a few talks are very promising; occasionally this promise holds good, but more often the transference becomes unmanageable to the patient and is apt to cause much discomfort unless handled with great skill. A real Freudian analysis is best avoided. Stekel has called attention to this and

as a result of his experience warns against the analytic treatment of manic depressive states.<sup>4</sup>

My own experience shows, as he remarks, how violent the transference may become, usually passing over to most persistent lovemaking. On repulsing these patients, a thing which cannot be avoided, although it must be done very carefully, they reject the idea that their love is only a transference, a father-image fantasy; they threaten to make away with themselves, unconsciously to arouse the analyst's sympathy, and gain tenderness and physical contact. They "will not leave the office," "they are only just so many patients," "they are numbers." They are very jealous of the other patients and soon make it impossible for the analyst to carry on his work. Much will depend upon the cultural type as to just how one can avoid these unpleasant cases. With individuals of fairly well-grounded intelligence one can avoid their falling into states of great depression where they threaten to kill themselves or kill the analyst. Stekel advises a course of Dubois's reëducation dialectics for these patients rather than a true analysis in the Freudian sense. It is better to deal with more superficial structures and leave the deeper motives untouched.

With some very intelligent individuals with mild attacks, or in free intervals, a very definite gain may be made by a complete analysis.

It is the analyst's duty in these cases to explain the situation to the relatives or friends clearly before offering any relief. The prognosis in most manic-depressive cases is not good and one can only try to do what one can.

Another very important chapter in psychoanalysis where harm may come to the analyst is that of consultations. At times one is called in by a colleague to see a patient who has a psychoneurosis or a mild psychosis. It may be evident from the start what particular complex situations are at the basis of the situation. To even start an analysis is bad technique, for it is surprising to see how rapidly a transference may be set up in these patients by one trained in psychoanalysis. To permit this transference to start

<sup>4</sup> Stekel, "Die Ausgänge der psychoanalytischen Kuren," *Centralbl. f. Psch.*, Vol. III, p. 300 in particular.

<sup>5</sup> P. Dubois, "Psychic Treatment of Nervous Disorders." Tr. by Jelliffe and White. Funk and Wagnalls, N. Y.

will endanger the analyst's standing with his colleague. He may tell him, if he has the courage, that his enemas, his arsenic, his this and that, are of no service for this particular patient, who needs mental therapy. The colleague will rarely respect the analyst's point of view, nor call him again in consultation. The colleague may ask the analyst to give the patient a "few" psychoanalytic treatments, as if psychoanalysis were like the "laying on of hands," or he may suggest that a coöperative type of treatment be undertaken; he to take care of the physical ills, the analyst to care for the mental ones. This is also a delicate situation since, as a rule, there are "no physical ills" to be treated. The gastropstosis, enteroptosis, dental sepsis, colon stagnation, etc., etc., so far as that particular case under consideration is concerned, are gross animistic superstitions; the psychical factors are the important ones. It is far better for the analyst to say that the thing is impossible; that the internist should continue to do what he can do, avoid meddlesome surgery, and, after a certain length of time, if nothing is accomplished, turn the case over to the analyst, who will take his try at it, promising to return the patient to his colleague, after a mutually agreed upon reasonable time for treatment. This ideal needs no elaboration. A stage of intellectual culture which permits so many animistic notions to control the thinking of the great majority of the population is not one sufficiently enlightened however to carry out such an ideal.

*(To be continued)*



## CRITICAL DIGEST

### SOME FREUDIAN CONTRIBUTIONS TO THE PARANOIA PROBLEM

BY CHARLES R. PAYNE, A.B., M.D.

(Continued from page 202)

One of the most recent analyses of paranoid conditions appeared in the *Jahrbuch für psychoanalytische und psychopathologische Forschungen*, Vol. IV, Part I, 1912, under the title, "Psychological Analysis of a Paranoid Patient,"<sup>1</sup> by SCH. GREBELSKAJA. The patient was a man of thirty-one years when he suffered his first attack. As a boy, he had been somewhat irritable; in school, he complained to his teachers that the pupils laughed at him, especially in gymnastics. He had no comrades, kept apart from others and played little. At the age of sixteen, he apprenticed himself to a mechanic, but became so homesick that after two weeks he gave up the job and went back to his father. He next became a waiter and worked in various cities of Switzerland, France and England but finding no pleasure in this occupation, he forsook it and returned again to his father, this time to engage in the manufacture of hats, which was his father's business. For a time, he got along well. When twenty-eight years of age, he became engaged to a girl but soon suspected her of being untrue and broke the engagement. He now felt himself annoyed by everybody and became very nervous. Next, he took up the sport of shooting very zealously. In the meantime, he was always out of humor, mistrustful, often troubled with insomnia and lack of appetite. When thirty-one, as he was going home one evening, he was assaulted and pounded; in this encounter, he cried out for help. In the darkness, he did not recognize his assailant but was convinced that it was a former school-mate named D. who had excelled him in athletics. After this

<sup>1</sup> Psychologische Analyse eines Paranoiden.

experience, he thought people were mocking him for making an outcry when attacked, suspected a plot against him; these suspicions grew upon him until he finally drew a revolver on one of the supposed persecutors and was committed to the asylum by the police. He was released after a short time but recommitted three years later for the same cause.

Patient is small, weak, with a certain shy, distrustful expression, irritable and suspicious; well oriented, of good intelligence; facial expression stiff; affectivity weak but retained. *Delusions of reference*: When two people talk together, they are speaking of him; if anyone laughs, it is at him; a person who coughs is jesting at his lung trouble; anyone crying out, is imitating his outcry during the attack. *Delusions of persecution*: They wish to put him out of the world, to poison him; they guess his thoughts, cheat him and keep him in the asylum because he is an important person. *Grandiose ideas*: He is the greatest inventor of airships, will receive one hundred thousand francs for his inventions; he is more intelligent than all physicians; his thoughts are of great value for all medicine; he writes a mass of articles on scientific themes. *Hallucinations of hearing and vision*: He hears voices and sees different people; has many hypochondriacal complaints such as a burning sensation in the head, empty feeling in the lungs, etc.; often his lungs are inflated. Diagnosis: paranoid form of dementia præcox.

#### ANALYSIS

The decisive factor in precipitating the psychosis was the attack. He acted like a child, cried out and begged for help. This was not in itself a cause of the disease but a factor which brought his greatest conflicts to expression. Ideas which were previously acting unconsciously, were now projected upon the outer world.

In following the author's analysis and conclusions, the reader should bear in mind that the analysis of a patient suffering from a psychosis offers much greater difficulties than that of a neurotic patient, for the reason that as soon as disagreeable or unpleasant complexes are touched upon, the patient is apt to become excited or silent and refuse to give any further information. Hence many points must be left deficient in detail or neglected altogether.

*Complex of Sexuality:* A word-association experiment gave certain results which pointed to an onanism complex; for example, the reactions: finger—disease, hand—sleep, sleep—cleanliness, numbers—five. To the question, what he meant by the association, finger—disease, the patient replied that many physicians were always inclined to consider onanism a cause of disease, which was not at all true. He said he had never practiced onanism but had read much concerning it and discussed it with his friends. Questioned concerning the reply, hand—sleep, he said that as a child, he was always anxious about touching his sexual organ; he thought that only he did that. Asked if he practiced onanism as a child, he denied it and refused to give any information on the subject. In this connection, he advanced the information that in his family, they were all very cleanly, especially the father, who was much given to complete baths. The father, he said, was a follower of the nature-cure and believed in the efficacy of baths and washing as a means of healing. The patient complained that he suffered in the asylum because he could not carry out these complete baths. As a child, the patient had been fond of watching other boys urinate in order to compare penises. He further related that in books, it was stated that onanism was harmful while Dr. Sch. said that pollutions were not injurious. He said he always had pollutions with dreams. The dreams concerned sexual things but their exact content he refused to reveal.

Asked what persons he saw in the dreams, he replied, those with whom he stood in "sensual" union, no, in "transcendental" union (German, "sinnlich" and "übersinnlich"). They are especially Dr. Sch., Prof. B. and Dr. J., earlier also D. (the one who had assaulted him), A., the latter's friend and others. He says: "It is a sensual union with a married person. My pollutions arise from the fact that I am sensually united with a patient who is perhaps in the waking state and is sexually excited; this excitation is transferred to me by sensual ways and if I am asleep, I dream of him and have a pollution. The union with the patient is formed by means of the brain of Prof. B. since we are both in union with Prof. B." Are you in sensual union with women also? "No, never, only with men and mostly with physicians." To the question if his father was related to this union, he replied most indignantly, "No, what are you thinking of?"



Patient was so much excited by this question that he at once began to speak Swiss German instead of his usual High German. This intense reaction pointed to strong repressed complexes. The father must stand in some relation to a sexual complex, otherwise why this tremendous reaction to the question. The author states that this transition in the patient's language, from High to Swiss German, occurred apparently unconsciously every time repressed complexes were touched upon.

The father has been the patient's ideal from childhood. In his whole behavior, when he speaks of his father, he acts like a child who stands in admiring awe of the father. "My father is the most noted man in the community; he can do everything, he knows everything, etc."

The author well says: "The father is the ideal of the young mind. With growth, critique changes the object of the first esteem, the father is no longer considered as perfect. In his place, come other authorities. But some individuals remain fixed in this stage of infantile transference, they hide themselves in these experiences; their minds harden as it were, instead of developing further. The great complex which ruled the patient in his tender years, which absorbed his whole mind and rendered him without emotion or interest for anything else in life, was the fundamental cause for his forming no new associations; in a certain sense, the attention to reality failed; hence the patient remained in this stage of infantile adoration, or, if he freed himself from it for a time, he soon reverted to his infantile attitude."

The patient related how he remembers his father in earliest childhood and what an impression he made on him. To the question, "Do you often see your father," he answered, "No, when I wish to think of father, the 'inspirator' comes and either makes me think of Dr. Sch. or shows me the latter's picture and often so exaggerated." We must pause a moment here to acquire a few facts regarding Dr. Sch. Apparently he had been the patient's family physician. In the psychosis, he is the patient's greatest persecutor. The voices tell the patient: "Dr. Sch. has studied his life from birth in somnambulism." Dr. Sch. will bury the patient alive, make his body rot, weaken him, cause him to have pollutions. If he would think of his father, he is compelled to think of Dr. Sch. Thus, Dr. Sch. stands in some kind of relation to

the father. It will repay us to note the author's keen analysis of this mental relationship. "As a rule, hate is joined to love." This attitude, to which Bleuler has given the name "ambivalence," permits the same idea to have two contrasting emotional expressions and allows the same thoughts to be entertained in positive and negative phases at the same time. The patient loves his father; the other component of the affect, the hate of the father, does not become conscious. But why must he think of Dr. Sch. when he wishes to think of his father? He hates Dr. Sch. consciously, he would like to kill him and perhaps would do so if he were free. Is this not possibly the expression of the hate which is missing in the relation to the father? Does he not identify the two personalities with the complex "father"?

Those emotions which because of education, we cannot entertain toward the father, we gladly shunt upon another person and thus escape the conflict. In order to evade conflicts, one buries himself in science, in order, as Freud says, "to transform passion into desire for knowledge," thereby rendering possible an emancipation of the complexes and the quelling of their activity. Another takes refuge in illness, as Jung has shown in his article "The Content of the Psychoses." Our patient creates for himself a substitute for the father in the personality of Dr. Sch. in order to be able to set free those emotions which have been rooted in his mind since childhood."

The following vision clearly discloses his homosexual tendencies: "Dr. Sch. was always shown to me only as his sexual organ. His penis was shown quite dried up and withered, he is already very old." How old is he? "Eighty years, no, fifty or sixty." Here, the patient misspeaks himself, which as all who have read Freud's "Psychopathology of Everyday Life" will understand, is not without its mental determinant. Eighty is about the age of his father. He is constantly thinking how the old man must still work and can receive no help from his son. The misstatement points to the submerged complex, the identification of Dr. Sch. with the father.

Neither in the delusional system of the patient nor in his hallucinations, do female figures appear. We know from his anamnesis that he had been engaged at one time but apparently he developed no strong passion for his fiancée. The only feeling he

had toward her was jealousy. He accused her of being unfaithful and loving other men more than him. How much actual ground there may have been for this accusation, the author could not determine, but the fact was known that the fiancée was a person of excellent character. As we saw in Ferenczi's cases,<sup>2</sup> ungovernable delusions of jealousy play a great rôle in the psychology of paranoia. These people are not adapted to love heterosexually. This deficiency in emotion, they project outward, asserting that they are not loved; also finding in this projection, an excuse for their deficient love.

Further derivatives of this powerful homosexual tendency may be seen in the following bit of the patient's delusion: "Even before I was received at the Asylum K., the voices told me that different persons were penetrating me. It is a kind of incarnation, perfect bodily union." These persons, he named as follows: "First comes D., A. and O. (A. and O. were friends of D. who according to his belief, had assaulted him), then Dr. Sch., Prof. B. and Dr. J. First A. penetrated me, he was the one who pressed within me. This penetration was so remarkable that I felt it in my whole body, it made me shiver visibly."

The interesting points in this delusion are, first, that the persons who penetrated him were also his persecutors; second, he assumed the passive part in the phantasy. In his "*curriculum vitæ*" which he had composed, he says, "In England, I was placed in a house as a girl for all."

Another time, the voices say to him, "D. is the one who can strengthen me, who can make me well." From this, we judge that he feels weak, sick. D. is, however, the person who in the patient's view, has assaulted him. It cannot be proven that D. was the assailant, but the patient believes it, which is the important fact for our consideration. The author traces the mental mechanisms so cleverly that we must follow the steps closely.

"Why is the person with whom the patient stands in his 'unconscious' in 'mental' union, whose sexual organ is shown to him (in imagination), with whom his 'voices' are ever busy, consciously considered as persecutor and even perpetrator of the assault?" As we know from the clinical history, the patient was beaten and behaved during the assault like a little child; he cried

<sup>2</sup> Reviewed in Part I of this series.



and begged for help. After this event, he immediately perceived the voices. Across the way, in the restaurant where D. was with his friends, he continually heard how they mimicked him, crying "help, help"; also, at night, he heard the same, as if a little child was being beaten and cried out.

Says the patient: "The voices are now ever busy with this affair, they ridicule me, they consider me cowardly, timid, perhaps unworthy of a good marksman." Now we understand why this event had such results for him. Even before it happened, he felt himself slighted, both in the family circle and the school; he kept aloof from all and clung only to his father. He says: "In the family, only brother J. counted who could do everything and earned the most money."

In the primary school as the patient's teacher reports, he was always gloomy and never played with his comrades. Otherwise, he was a mediocre pupil, showing no especial talent. That which he could not do, he wanted to do. When thirteen years old, he first greatly admired this same D. at gymnastic exercise. He told his teacher, D. was the best gymnast. He approached D. a little but lacked the courage to form a friendship with him. The patient says: "I could never speak in his presence in spite of the fact that I wanted to." When the patient returned from abroad D. already had a good position and a circle of friends. The patient often associated with them but never felt quite at home in their company. He says he always went home with a headache after being with them. He did not wish to seem so much inferior to them. Since he must assert his manhood in some way which was possible for him, he devoted his whole interest to sport. In this way, he proved his manliness. By the assault, he was driven back to the infantile as by a stroke. At the same time, the foundation of his artificially erected manliness broke down. Now, he felt still more keenly that he could accomplish nothing in life, he heard voices which ridiculed him, mimicked him as he cried for help.

Our patient also lacked manly courage in general, the courage to live, therefore he fled into illness, that "lightning conductor of all conflicts." In the psychosis, he is the greatest inventor, he makes wonderful airships and gramophones. The voice which ridicules him is predominantly the voice of D. With the latter,

however, he is also in "mental" union, he would be like D.; in school, it was D. who possessed what he lacked. D. was stalwart, strong, good fellow, had much intercourse with women (as patient indignantly relates). There arose the wish to come into closer association with his ideal but the courage to do this was lacking. Then came the event with the sudden assault. Now the patient began to hate D.; he was persecuted by him, maltreated, D. was his greatest enemy, had formed a plot against him. As Freud showed in his Schreber case, the person who is longed for, becomes the persecutor, the content of the wish-phantasy changes to content of the persecution. The statement, "I love him," is contradicted by the delusion of persecution which proclaims: "I do not love him, I hate him." This contradiction which could not run otherwise in the unconscious, cannot come into the paranoic's consciousness in this form. The mechanism of the symptom formation in paranoia demands that the inner perception, the emotion, be replaced by a perception from without. Thus, the formula changes by projection from "I hate him" to the other, "He hates me, which justifies me in hating him" (Freud). This same mechanism, we can see in the case under consideration. In this manner, D. becomes the persecutor, the assailant. The incarnation-phantasies are analogous to Schreber's coitus-with-men phantasies. This patient also plays the passive part since one "penetrates him and thereby he becomes another." He says: "When A. was in me, the voices said: 'Now he has me completely in his power, now I am no more, but A. is active within me.'" This reminds us of the mystics, who when possessed by God or filled with His spirit are no longer themselves but become God.

To the question whether he had defended himself against these penetrations or incarnations, the patient replies: "No, why should I, it came spontaneously and the voices were also right, I have become another, something acted in me, thought in me. The voices said to me: D. and A. yield themselves voluntarily in order to give me sensual strength. By hypnosis, they have completely drawn my strength upon themselves, therefore they must give me back again the stored up strength. Then I could become healthy again. I suddenly felt as if my lungs were inflated. Then I felt myself stronger again, after the inflation. Then you

might say, A. or D. may be in me, hence I had a better feeling of strength."

From these productions, we learn the following: The patient is in union not only with D. but also with A. These are two different personalities, D., a Don Juan of the village, A., an ordinary citizen. Both afford his voices material, they give him new strength, new life. He does not, however, sharply differentiate the two personalities from each other; really, there is only one person, D., to whom the patient has imputed the good parts of A. The condensation is similar to that of the dream where two personalities who belong to different systems of thoughts are identified. D., his wish-phantasy, the embodiment of his unsatisfied wishes and his resistance against these, his morality, his conscious striving and desire. While D. represented the realization of his unconscious, A. is the ideal of his conscious mind.

In these phantasies, is contained the great problem of the patient, namely, how he can get well. He is always asserting that he has been wrongfully committed. He dwells constantly on the idea that it is not he but the physicians who are mentally unsound; this opinion, he zealously defends. But perhaps unconsciously, he feels the inner dissensions of his mind. These he must in some way seek to correct. "A. and D. have strengthened me by the sensual union" he says. Thus, an avenue of escape is provided, which of course, only his unconscious can accept. The union with D. will make him healthy. In other words, the satisfaction of the homosexual ideas and wish-phantasies will restore him his potency which was destroyed in him by hypnosis.

Who makes him impotent and how? Dr. Sch., D., Prof. B. and Dr. J. are the chief "inspirators," they manipulate his sexual organs, give him sensuous thoughts until he gets pollutions. "They have always sought to weaken my body in order to use me for experimental purposes." Thus, they are the same persons who also strengthen him. Further, in the description of the sexual persecutions, we see a plain ambivalence. He must become impotent, lose his manhood, no longer exist as a man, become a woman. And then, by the incarnation of D.—A., he will become strong again, perceive a feeling of strength in his whole body, then he is saved. The transformation from man to woman, which in Schreber's case, was an act of God, is brought about in



this case by the "inspirators." Dr. Sch. whom we have recognized as the personification of a part of the father-image, is also the chief persecutor who occasions the most pollutions in the patient. But by this persecutor he is strengthened and healed. The patient plays the passive rôle, however, in this process because he is no longer a man but a woman. The author shows that deeply hidden in the patient's mind, the father is also included in the ranks of the persecutors.

The mother-complex seems entirely lacking. Of his mother, the patient never speaks spontaneously. When questioned concerning her, he replies in an indifferent tone with dates of her illness, death, etc. Neither in his earliest childhood nor in later years, can any traces of his relations to the mother be shown. He is always speaking of his father but almost never of his mother.

*Ideas of grandeur:* As we learned from the clinical history, the patient is the greatest inventor in the world who will receive immense sums for his airship. He is such an important personage that they have had him committed to the asylum. He understands much more than all physicians, all lawyers, all mankind in general. He will become the most famous Swiss, and will never be forgotten on earth. His thoughts have great value, hence machines are constructed to ascertain them. His semen is wonderfully valuable. They keep him in the asylum in order to be able to dissect him because his brain conceals colossal importance. He is strong, powerful. He often dreams of Hercules. In reality, he is very small and ugly. It is not hard to see in these delusions the compensations for the things which he lacked in life. The idea of the airship which occupies him most of all, serves to give him fame and to provide him a defence against his enemies. It may be that the phallic shape of the airship (Zep-pelin) has some significance also. Earlier, he had busied himself with the idea of perpetual motion which the author well characterizes as the "phantasy of the impotent."

The patient's libido seeks satisfaction in two ways: first, in sublimations; he shows interest in scientific questions touching on the nature of hallucinations, sense perceptions, etc. Only, with him, the sublimation is a failure, else he had not been ill in this manner. The second way is that of phantasies, incarnation ideas,

the mental union with Prof. B. and the physicians. This part of his sexuality he has very strongly dammed up and prefers to devote himself to inventions, to seek his salvation in these.

Death plays an important rôle in the patient's phantasies. He is buried and sees his own corpse. Death is closely connected with sexuality. The voices say to him instead of "buried," "gratified" ("beerdigt," "defriedigt"). But for him, the words have the same meaning; the voices distinguished between these not at all and use one word for the other. In connection with his death phantasies, the patient develops certain neologisms which the author elucidates in some detail. Since it is almost impossible to preserve the meaning in translating these new words and phrases, for the point usually depends upon the shifting of a letter or group of letters in the German words, we may pass on. There is nothing in them essentially characteristic of the paranoic mind.

We may glance at a page or two of interesting somatic hallucinations, picking out one or two as illustrations of the many given: one kind, the patient calls "heart eruptions" like a Vesuvius. Another variety is a burning in the head which he connects with his pollutions. Others are, a hardening of the abdomen, his blood is withdrawn, etc.

The patient also has an interesting philosophical system. No man has a soul of his own but only a part of the world-soul. He feels himself a part of the cosmos, in union with other souls who lived thousands of years ago. He says: "I was in sensual union with my father before I was born, I really lived in the father." Thus, he takes part in his own creation through identification with his father.

*Resumé:* The author sums up the salient points in the case so vividly and instructively that I reproduce them almost entire.

"Even in childhood, the patient displayed an abnormal deficiency of those attributes which usually characterize his sex. Among his comrades, he is the weakest, he is ridiculed, pushed back and remains constantly alone; the lack of manliness (which appears even in boys as pleasure in scuffling and fighting) forming a barrier between him and his companions, makes him feel, even in the years of childhood, that he lacks something which others possess. Added to this deficiency, was his clearly marked

though still unconscious homosexual tendency; this appeared in childhood in the passive phase. In the further course of life, with the general mental development, all these mental peculiarities came to ever sharper delineation. Having become independent, he remains always alone, wanders restlessly from place to place, seeks connection with society but does not find it; finally, his passive homosexual tendencies compel him to return to his father. These tendencies remain suppressed in the depths of his unconscious but nevertheless prevent a normal real transference of his libido.

"We may surmise that the problem of acquiring manliness had continuously tormented him since the years of maturity; in order to learn what he lacked and what his comrade D. possessed (strength, courage) he sought to approach him, but naturally, because of his complete passivity, he could not succeed in this. At last, he thought he had found a means of becoming a man in the sport of shooting which occupies such an important place in the history of his country and there often serves for such a purpose. He finally attained a certain perfection as a marksman. The laurel-crowns compensated for his feelings of insufficiency, they might have soothed him for a long time without completely eliminating the conflict. Now came the event which frustrated all his attempts, which taught him explicitly the insolubility of the problem of becoming a man like the rest. He was ignominiously pounded and behaved like a child. From this scene, start all his delusional ideas of general laughter which arises over his downfall and which makes him appear as the object of universal jest.

"The ideas which subsequently develop, that they would strike him dead, destroy him, etc., drive him to withdraw from the external world and from men who are all hostile to him; he goes back into his inner world and seeks the long hidden, suppressed material as sufficient in itself. The earlier suppressed emotions now obtain free play—he flees into illness—in his delusion which provides him as compensation for the deficiency in real transference, an inner transference (introversion and regression) upon the father-image. The mechanism of projection of his emotions in the disease is very characteristic. We find with him the same mechanism of repression and displacement of the father-complex which Jung has described: 'the suppressed affect comes to the



surface, seldom directly, but ordinarily in the form of a displacement upon another object.' We find this displacement with the patient in the replacement of the father by the relations to Dr. Sch. and Prof. B.

"Hate against the man D., gifted with all the attributes which the patient lacks, whom he admires and envies, is an especially plain example of ambivalence (love and hate). The agency of the ambivalence in the homosexual feelings of the patient makes itself plain. We have already emphasized in the text that his homosexual tendencies are decidedly ambivalent. The father, on whom he depends in infantile manner, who remains his highest authority, changes in the disease into Dr. Sch. and Prof. B., whom he identifies with the father. These personalities are, however, also his persecutors whom he consciously hates. It is worthy of note that this hatred is mixed with erotic emotions, as the patient many times mentions that these persons who penetrate him, at the same time strengthen him, afford him new strength and power; on the other side, they weaken, torment and use him up. D. is the one who has destroyed him, he must now also strengthen him. That which destroys can also strengthen; this thought is probably as old as humanity. 'In me are D. and A. active,' says the patient; exactly the same as good or bad spirits could be active in men according to the old belief. These different results and also the sensual figure of his father, he ascribes to Dr. Sch. and Prof. B. The father weakens or strengthens him, gives him strength or destroys him, a plain proof of the close relations of certain religious ideas to the 'magic' significance of the father-image.

"The mechanism of the formation of delusions of grandeur is also very typical of his unconscious mental processes. Even in the period of his good health, his thoughts revolved around the idea of his insufficiency. This idea continues its existence in repression in the disease; it no longer expresses itself consciously in continual striving to attain his ideal. We see him in his delusion as the greatest Swiss, the inventor, the strongest and most powerful man (Hercules). He builds mighty airships and if he succeeds in building an airship which can be readily moved toward any side, then he is saved.

"In numerous places, we meet phantasy structures to which

the historical-mythological method of consideration developed by Jung in his schizophrenia theory can be applied. I mention the world-soul theory which reminds us in part of modern, in part of very old philosophical views. Making the substance of the soul the same as light is a further point which was likewise an ancient view. The preëxistence of the patient in the father is even a current Christian doctrine, especially plain in John's Gospel. The penetration of the magic working personalities into his own body is a fundamental conception of the mystics. The accompanying inflation of the lungs points to the light- or air-nature of the invading personality, likewise an ancient view. The belief that the phallus is a substitute for the whole personality is similarly ancient, the phallus is a picture of the godhead.

If we proceed to the consideration of the inner mechanisms of the father-complex, the patient plainly transfers his father-complex upon Dr. Sch. and Prof. B. The father (Dr. Sch. and Prof. B.) is his persecutor who causes him to suffer and torments him in all possible ways. The patient proceeds now according to Freud's formula: he hates the father, therefore the father hates him, that is, the father causes his sufferings. The physicians, Dr. Sch., Prof. B., intend to dissect him, to prepare all sorts of tortures for his body; they do this to attain their own selfish aims, for his being, especially his brain, is important for the world. The foundation of his psychosis lies in his father-complex.

Of the mother-complex, nothing could be determined, in spite of the fact that in the infantile, a mother-complex must have been present. In all probability, the libido directed toward the mother was, at a very early age, almost entirely displaced upon the father; thus, the over emphasis and pathological importance of the father is explained."

Those readers who followed the first numbers of this series, will find in this case a confirmation of many of the points brought out by Freud and Ferenczi in their cases.

*(To be continued)*

TRANSLATION  
WISHFULFILLMENT AND SYMBOLISM IN  
FAIRY TALES

BY DR. FRANZ RIKLIN

TRANSLATED BY WM. A. WHITE, M.D.

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*(Continued from page 216)*

Whoever has familiarized himself with dream analysis will easily find the sexual symbolism in this dream.

The long street is a passage in the female genitals. In the same sense there are, for example, slanting, upward opening, roof windows which, through an obstruction are with difficulty accessible (hymen). In a similar dream there came down the steep stairs small, naked, smooth headed boys from the school, homunculi, who signified new-born children, who later would manifestly study like papa!

The stove pipe was also often dreamt of in the same way. Out of it came a rose-red serpent, which was very long. Compare the Russian fairy tale of "The Little Bear," that will be mentioned in a later chapter. This last dream picture is from a young mother, to whom the time until the arrival of the child seems very long. The serpent is used, as we will see later, as a symbol for the male organ and through which fruit is brought forth; the long time is represented by the length of the serpent. The popular saying is: "At Frau N.'s the oven has fallen down," that means that Frau N. has given birth.

The portal in the earlier related dream and the mouth in one to be related later belong to dream symbols to be similarly interpreted.

In the forest fire there are two components. Forest has here



the same sexual significance as the nymph's forest in Freud,<sup>8</sup> it is the forest on the so-called *mons veneris* of women and belongs with it in the neighborhood of the long passage.

When there is burning in a dream usually the fire of love burns; in the dream, in the usage of language, in figurative representation (the heart of Jesus is, in the church symbolism, almost always represented with a flame, as the symbol of love, bursting forth from it) fire is closely connected with love; similarly in mythölogy.

In the special case this significance is quite transparent. The brother appears as a fireman. The brother represents therefore the family of the dreamer, which, living in the city does not agree with his marriage, and how this will prevent the fire. With this, is also connected, that the dreamer will not marry in the uniform of the rigid, confessionally disposed brother (family) but thinks, it makes no difference, one can marry civilly. He appears from now in riding costume. Just as we must translate the fire of the fire dream into love, so riding, signifies empirically, usually something sexual.

Women often dream in similar connection of horses which prance immediately before them and threaten to crush them.

The further analysis of the trousers will be passed over at this point.

The dreamer carries a sort of saber, not as usual but in a position and direction as becomes the erect phallus. In the place of the saber succeeds a sort of cow-hide. In the swiss dialect *Hagenschwanz* is the name for it (Hagen from *Hägi* = bull; *Schwanz* is a military and also a common designation of the phallus). The *Hagenschwanz* is made from the phallus of the bull and that is how it gets its name. On account of its elasticity it is used in place of a whip by cattle drivers and is, besides, a much feared means of punishment. It appears in this rôle in common parlance. When besides in the dream the saber is used to fight it has to do usually with a sexual conflict, also besides that the saber for explanation is transformed into a *Hagenschwanz* and must be carried in place of an erect phallus (the saber is stuck in the sheath!). So now the dreamer hastens in the direction of the burning woods.

<sup>8</sup> "Bruchstücke einer Hysterieanalyse," *Monatsschr. für Psychiatrie und Neurologie*, Bd. XVIII, 1905, Heft 4 and 5.

The cry from the house is exactly like that which a short time before the dreamer heard in a zoological garden as he was walking by the animal cages with his bride. It came from a pair of pumas that were just about to copulate.

Only through these symbolisms was it possible to concentrate the whole dream, which was cut into so many trains of thought, into one picture. The analysis shows us repeatedly how many symbol constructing elements exist in the dream. The strong erotic of the dream is, however, only clear to the initiated. We see here horse, bull, saber, cow-hide, etc., namely animals and objects, the latter brought into relation by derivation or similarity with the symbolic representation employed in the indication of symbols of man as a sexual being.

We find similar material, for example, in a work of Jung.<sup>9</sup>

Hysteria has innumerable symbolic representations that through special mechanisms and memories are always again being awakened and still remain hidden to consciousness. Hysterical attacks are often in their essential parts abridged, symbolic representations, also the hysterical physical symptoms and conduct.

A short hysteria analysis will follow in a few pages.<sup>10</sup>

Dementia præcox, which represents the commonest mental disease, is in a high degree manifested in symbolic thinking<sup>11</sup> and the same thing is seen in other psychoses.<sup>12</sup>

Paradigms are mentioned under the wish structures of dementia præcox and we will return to others in examples of fairy tales.

## V

### THE SYMBOLISM OF THE FAIRY TALE

In Bechstein's collection of fairy tales, illustrated with Richter's attractive pictures, one of them that belongs to the tale of "Oda and the Serpent" strikes me. The tale runs as follows:

<sup>9</sup> "Diagnostische Assoziationsstudien," VIII Beitrag, *Journal f. Psychologie und Neurologie*, Bd. VIII, 1906, Leipzig, J. A. Barth.

<sup>10</sup> In earlier works I have given examples of such symbolism. Compare "Diagnostische Assoziationsstudien," VII Beitrag, and *Psychiatrisch-neurologische Wochenschrift*, 1905, No. 46.

<sup>11</sup> Compare Jung, "Ueber die Psychologie der Dementia præcox." Halle a. S., Marhold, 1907. See (this series).

<sup>12</sup> Bleuler, *l. c.*

Once upon a time there was a man who had three daughters, of which the youngest was named Oda. Once the father was going to market and he asked his daughters what he should bring them. The oldest asked for a golden spinning-wheel, the second for a golden reel, but Oda said: "Bring me what runs under your wagon when you are on the way back." Then the father bought at the market what the two eldest daughters wished for and started home; and behold there ran a serpent under the wagon which he caught and brought to Oda. He threw it down into the wagon and afterwards before the door of the house where he let it lay. When Oda came out the serpent began to speak: "Oda, dear Oda, can I not come in on the porch?" "What," said Oda, "my father has brought you to our door and you wish to come up on the porch?" But she let it come up. Now as Oda went to her room the serpent cried again: "Oda, dear Oda, may I lay before your room door?" "Ah, see that," said Oda, "my father brought you to the house door, I have let you in on the porch, and now you wish to lay before my room door? Well, let it be as you wish!" Now as Oda was going into her bed-room and opened the door of her room the serpent cried again: "Oh Oda, dear Oda, may I not come in your room?" "How," cried Oda, "has not my father brought you to the door, have I not let you on the porch and before my room door, and now you wish to come with me in my room? However if you will be satisfied now come in but I tell you to lay still." With that Oda let the serpent in and commenced to undress. When she was about to get into bed the serpent cried out again: "Oh Oda, dearest Oda, may I not get into bed with you?" "Now that is too much," cried Oda angrily, "my father has brought you to the house, I let you in on the porch, afterwards before my room door, afterwards in my room, now you want to get into bed with me. However, you are probably frozen. So come in with me and get warm you poor worm!" And then the good Oda stretched out her soft warm hand and lifted the cold serpent into her bed.

Into the bargain now the serpent changed into a young prince who in this manner was freed from the magic spell; and he took the good Oda to wife.

The sexual symbolism of this tale, the single phases of the seduction, the change of disgust into affection, are so transparent,



that explanation is unnecessary, and the transformation at the critical moment makes any such wholly superfluous.

The serpent is here the prince, in the language of fairy tales that signifies the wished-for man. The symbol is by no means, however, accidental. As in magic and fairy-tale symbolism the part (for example the charm) almost always stands in place of the whole; that is protects from the bewitched or from magic, or calls forth magic, so is also the serpent a part of the man, namely the phallus. In the story of Oda this substitution is apparent. One has the feeling in reading it it might just as well have been the relation of a dream which a patient with hysteria or dementia præcox had had.<sup>1</sup> Indeed we meet the serpent there with absolutely identical significance and in dementia præcox also in other pictures which are of dream-like construction, for example, in delusions, hallucinations, wish deliria, etc. There are snakes which creep into the genitals or bite near them. They are cold, disgusting (as with Oda), they have the same tendency to produce terror, and a feeling of uneasiness that so often adheres to the anticipation of the sexual. Snake dreams are very common with hysterical women and can almost always be traced to this signification.

It must be pointed out, with the exception of what has already been said, what the serpent means as a sexual symbol. That it has a very great significance in mythology, in race psychology, in fairy tales, and in psychopathology. Stoll mentions the importance of the serpent in the popular belief of the cause of the miracle of Moses ("Suggestion und Hypnotismus," p. 214, II Auflage; the brazen serpent). Mention is also made of the serpent miracle of Moses (2. B. Mos., Kap. IV u. VII).

After Moses has seen the Lord in a vision (Chapt. III) and been called by him to be the Savior of Israel,<sup>2</sup> he desired a miracle

<sup>1</sup> See the "little green serpent" in Jung, the "Psychologie der Dementia præcox." Halle a. S., Carl Marhold, 1907. Monograph Series No. 3.

<sup>2</sup> A teleological hallucination: like that which we meet commonly as the deciding point in the lives of great and small religious minds; it marks a moment from which they live wholly according to their ideal. One thinks of the conversion and the call of Paul; of the vision of the holy Francis of Assisi; of Goethe's beautiful soul, Susanna von Klettenberg, who, as the conclusion of her oscillation between heavenly and earthly love felt in a vision—not as before, God in general—but specifically the attraction of

from him, so that the people might believe in the vision of the burning bush and that he was chosen. God makes his staff change into a serpent; Aaron repeats this miracle before Pharaoh; we see also the Egyptian magician do it. The staff of Aaron twists about the staff of the Egyptian. Shall we not think here of a dream-like erotic symbolism when it borders upon the previous vision of the burning bush that itself moves upon dream-like ground? The staff becomes a serpent; that is the miracle; and the Israelitish serpent twists about the Egyptian; does not that mean that Israel's men will vanquish the Egyptians?

We learn from Stending<sup>3</sup> of the serpent especially as the soul animal, that is, the animal into which the soul is transformed after its separation from the body by death. Erechtheus (later Erichthonios, another name for Poseidon) of Athens was taken from his mother, the earth, and given over to his false sisters Aglauros, Herse, and Pandrosos to care for, who, at the sight of the serpent-like child, were seized with frenzy and threw themselves down from the castle cliff. Later this God was seen incarnated in the temple serpent maintained in the Erechtheion (according to Stending a proof that, originally residing in the depths of the earth, it was as well the God causing the fruitfulness of the land and also death).

From the same source I take the following about the orgies of the Mainades of the Dionysius cult. The wild round dance, the shaking of the head, the shouting and the deafening music of the flutes brings forth by night time in passionate stimulation crowds of women carrying torches in the mountain forests, who in connection with the use of intoxicating drinks are thrown into convulsions in which they believe themselves united with the god. (See also Stoll, II. ed., p. 317.) Their souls seem to leave their bodies and to mix with the spirit hosts of the god, or they think, that the god himself enters into their bodies so that they are full of the god.

To the god Dionysius as to the soul itself is ascribed a serpent form. In order to be able to take him into themselves, his worshippers transform the man Christ in the body. Here the union with the definite object of love is very clear. In certain sects the producing of such "conversions" is frankly strived for.

<sup>3</sup> "Griech. und röm. Mythologie." Leipzig, Göschen, 1905.

shippers therefore tore and devoured snakes or, according to the old belief, other young animals consecrated to him and representing him as bull calves and rams, and in the earliest times probably also children, and drank the blood as being the bearer of life, and clothed themselves in the fresh pelts. In this way they called upon God with loud voices that he would grant them fruitfulness in the new year.

The small Dionysia held in the country and in Athens itself, the Anthesterins (flower feasts), have the same meaning; they represent the symbolic marriage of the god with the queen representing the country, who, at the time of the republic, was represented by the wife of the Archon of Basilea.

The serpent is also the attribute of heroes. In the Roman mythology there are related to the spiritual beings (*manes*, *lemures*, *larvæ*), spirit-like creatures, the *genii*, the representatives of the life and procreative powers of man, and the corresponding *junones* for women. At birth they enter into men, at death they leave, and like the souls of the dead the spirits are represented in the form of a serpent.

It may be that serpents and also dragons (both ideas often overlap in mythology and fairy tales) have a broader significance in these territories than at first sight would appear, certain it is, that they very often have a sexual meaning or a meaning closely associated with the sexual, and that that is the original meaning. That is shown by the above mythological digression. In fairy tales the ideas of dragon, serpent, giant, devil, monster are often used promiscuously. They commonly play the same rôle.<sup>4</sup>

If, however, perhaps in fairy tales that are full of mythological reminiscences and fragments, this supposition is permissible, so probably in present-day psychopathology the old mythology is less responsible than the similarity with the male genitals, with the appearance of the serpent as a sexual symbol (both symbolic series have a common origin). An hysterical patient, who, for example, in a dream was bitten in the mouth (instead of the

<sup>4</sup> In Bernhard Schmidt ("Das Volksleben der Neugriechen und das hellenische Altertum," 1 Teil, Leipzig, B. G. Teubner, 1871, pp. 186-7, note 1) there is an intimation as to the masculine sexual root of the serpent worshipped as a good house spirit: If the whole male branch dies out in a house then the house serpent has forsaken the house forever.



genitals) by a serpent, had no such mythological knowledge. The example will be further referred to later.

It is similar with other elements in the fairy tale. In the sexual dreams of the mentally disordered, for example, we know the magic wand, the divining rod in sexual symbolic meaning. In fairy tales, however, the significance of these objects may be displaced, and so not every fairy tale serpent is a sexual symbol. We have, however, instances of fairy tales in mind in which the mythological series meets and crosses with that from dreams and psychopathology.

From the different collections which I know well I will select a series of examples of the sexual symbolism of fairy tales.

*The Frog King* (Grimm, No. 1).—The princess lost her golden ball which fell into the water. The frog, who came out of the water, promised to bring it back to her. As a reward, however, he will have neither the clothes, pearls, precious stones or crown; but the princess must promise to love him; he wished to become her chum and playmate, sit by her at her little table, eat from her little gold plate, drink from her little cup, and sleep in her little bed. She promised and he got the ball; when, however, the princess did not keep her promise the frog, the following day, hopped to the palace and asked the princess, who felt fear and disgust of him, to keep her promise. He made then, one after another, requests similar to those made by the snake in the story of Oda. Perhaps here the eating together is also a sexual symbolism (perhaps also the ball?). The princess was afraid to sleep in her little bed with the cold frog which she hardly trusted herself to touch. Because she was commanded by her father she picked up the frog by two fingers, carried it upstairs and put it in a corner. When she was in bed the frog asked to be lifted up into bed with her. Then the princess became very angry, took him up and flung him with all her strength against the wall. What fell down, however, was not a frog, but a prince who became her beloved spouse.

The similarity with "Oda" is very great, only that Oda after first being angry picked up the serpent in love and took it up to herself. The moment of the going over of the sexual disgust to love is somewhat displaced. Quite clearly, still more so than with Oda, is represented the original sexual aversion and prudery

of the maiden, the uneasiness and shyness before the crude sexual, the penis. That there is already a sexual wish present we know. The form of the wished-for prince (serpent, frog, bear, etc.) supports a new determination. It represents the sexual uneasiness, disgust. Instead of the tale describing the change in the heroine it projects it upon the wish object. It becomes agreeable to the heroine, so a change appears, from the disagreeable to an agreeable form, from the disgusting beast into the beautiful prince.

The wicked action of the sexual rival, who has caused the change, and this well-known psychological process are here represented condensed.

The frog as a "little man" we often meet in our case histories as well as in the associations in researches with normal and hysterical women, where the co-called "failures," long reaction times and other "complex indicators" appear.<sup>5</sup> I refer to such an example in an earlier work.<sup>6</sup>

In the beginning of the fairy tale "The Sleeping Beauty" a frog appears (Grimm, No. 50, Bechstein, p. 223).

In olden times there was a king and queen who said every day: "Oh, if we only had a child!" but no child came. Then it happened that once when the queen was in her bath a frog hopped out of the water and said: "Your wish will be fulfilled; before a year goes by you will bring a daughter into the world!" What the frog prophesied came to pass and the queen bore a daughter that was beautiful beyond compare.

If the significance of the frog does not appear so evident here as in the "Frog King," it will, however, be perfectly clear if we compare this example with later ones, especially those with Freudian transpositions (*Verlegung*). Again and again impregnation is represented in childless people in symbolic form (here the frog is the symbol of fertilization), and the child originating therefrom has a fate of projected significance.

The tale brings thus, among the applications of the magic and transformation technic undertaken by it, first the symbol, in order to represent the sexual story and establish in the given moment the whole as represented by the symbol.

<sup>5</sup> "Diagnostische Assoziationsstudien," edited by C. G. Jung, Leipzig, J. A. Barth.

<sup>6</sup> "Diagnostische Assoziationsstudien," VII Beitrag, p. 246.

*The Tale of "The Little Hazel Branch"* (Bechstein, p. 40).—A merchant has to make a journey and wishes to bring back a present for his three daughters. (Compare "Oda and the Serpent.") The first wanted a pearl necklace, the second a diamond ring, the third whispered her wish for a beautiful, green, little hazel twig. On the way home he had great difficulty to find one. Finally he accidentally discovered a beautiful, green, little branch with golden nuts. As he broke it off, a bear, to whom the branch belonged, rushed out of the thicket. He surrendered it to him; the merchant had to promise the bear, however, to give him that which he first met on the way home. Naturally this was the youngest daughter. The bear came, after a little while, with a wagon to take her away. When he returned to the forest he asked her to caress him, noticed her manner, that it was only that of a substitute peasant maiden and instantly went for the right youngest daughter of the merchant. The bear took his bride to a cave with horrible dragons and serpents, and by not looking about her she breaks the enchantment and the bear becomes a prince, the owner of a beautiful palace and the liberated monsters are his followers. The bear is thus the prince, to him belongs the fruit-bearing little hazel branch that is here the special sexual symbol. The disenchantment explains the relation only that therein the little branch is no longer mentioned. The analogy with Oda and the serpent is quite transparent. The idea of the magic cave is naturally assisted by the mythological view of the (chthonischen) divinities dwelling in the ground and in the mountains, and perhaps the bear is a prince who has died and the fearful animals, his followers, who are freed from magic or death. The little hazel branch to be sure fits only half way into this symbolic series while it has its own special sense and place in dream-like sexual symbolism.

Nuts are northern symbols of fruitfulness and are distinguished as such ornament on the Christmas tree. I have met them also with quite the same significance in a dream of a patient with mental disease. The following example illustrates the twig as a masculine sexual symbol.

Hoffmann-Krayer<sup>7</sup> relates of the shrove-tide customs in

<sup>7</sup> "Fastnachtsgebräuche in der Schweiz.," *Schweizer Archiv für Volkskunde*, I Jhrg., 1897, p. 126, u. speziell, p. 133 ff.



Switzerland: "In general these (Shrove-tide customs) are still marked by sexual excesses, that originally probably proceeded from a symbolic act, which in the spring, similar to the awaking of the nature spirit of the plant world through different kinds of ceremonials, should bring about human fruitfulness.<sup>8</sup> The whipping of women or virgins with a twig or a bush, was a common action in all of these customs."

The author cites the following passage from the "Fast of Montanus" (Carmelite monk in Mantua, 1448-1516).

And with long straps, cut from odoriferous goatskin  
They lashed the palms of young women, whom by such beating  
Pleasing the god, they believed to assist in childbirth.

Mannhardt brings more material (Der Baumkultus, 1875, p. 251). He calls this the "stroke with the branch of life." Besides there may be connected with these views the present-day custom of holding a wedding in shrove-tide.

The author relates further of the widespread similar custom of single women sitting on the plough to be drawn about and of the so-called "Giritzenmoos" excursion. The old maids, in person or as dummies, are taken to a moor (Torfmoos) for punishment of their sterility, where they must live transformed into plovers (Giritze), which at this time are found in those regions. In several other articles in the same archives attention is drawn to the relation of this custom to the Danae saga.

"In the Frick valley (Switzerland) following a wedding celebration wine is poured in the lap of the maidens probably as a promise of fruitfulness."

In the same archives we read of May sports (p. 153). "Opposite the room window of the old maids a large straw man is hung up named 'Mäia-Ma' [May man]. Many old maids had to be satisfied with fool branches" (Narrenästen) (Zindel, "Folk Customs in Sargan and Surroundings"). The male organ of copulation was besides often called "rod" [verge in French].

<sup>8</sup> I am reminded of the phallus in Greece and the lingam in India.

(To be continued)

## ABSTRACTS

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ABSTRACTED BY L. E. EMERSON, PH.D.,

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1. Remarks on a Case with Griselda Phantasies. DR. JAMES J. PUTNAM.
2. The Significance of the Grandfather for the Fate of the Individual. PROF. ERNEST JONES.
3. Some Remarks on the Rôle of the Grandparents in the Psychology of the Neuroses. DR. KARL ABRAHAM.
4. The Grandfather Complex. DR. S. FERENCZI.
5. Reduction of the Motives of Repression through Recompense. DR. VICTOR TASK.
6. A Little Human Rooster. DR. S. FERENCZI.

I. *A Case with Griselda Phantasies.*—The patient was a man (aet. 55) of good family and belonging to the best society; a well-educated, unselfish, vigorous man, with unusually good family traditions. His principal trouble was a peculiar estrangement—coupled with a tender affection—existing between himself and his 18-year-old daughter. He had gone abroad with his daughter with the hope that with attentive care he could recover his health. He was constantly so very irritable and depressed that he could neither make her happy nor win her confidence. Till he returned home the patient regarded himself as responsible for this mutual mistrust. As, however, his daughter grew to womanhood and could dispense with his care, he gave way to a jealousy of her interests, and blamed her for personal faults and shortcomings. His deeply felt love struggled with a strong feeling bordering on hatred. This feeling drove him to wish for her, in his thoughts, an insignificant but yet actual pain. This wish to punish his only and deeply loved daughter originated in two motives which were gradually discovered in the course of the analysis. On the one hand the patient sought to play with the idea of injury and so enhance his narcissistic nature which was already

stamped on him in spite of his good and unselfish disposition. On the other hand he sought to satisfy a strong tendency to sadism and masochism which he had had to a high degree all his life. An incomplete sublimation had partially concealed those tendencies. They were, however, always present, and had manifested themselves strongly in a long series of onanistic phantasies as well as in his dreams. From his earliest youth the patient had been an onanist, and although he had been married thirty years he had not yet entirely overcome it.

The patient, who had well observed himself, believed that this concentration of his thoughts in his daughter was not the cause of his illness but was merely an occasion for expressing abnormal wishes and low spirits. He believed, moreover, that it was the satisfying his morbid instincts that was the root of the evil. Yet the strong suspicion remains that the incestuous instinct provided one essential motive. His strongly repressed sensations towards his daughter ruled him perhaps more than he was aware of. As he himself said, in the early morning as well as later, especially during idle hours, he thought of his daughter with longing, yet in a blaming, angry, and ill-humored mood.

The study of the first three or four years of the patient's life brought out the fact that besides his good qualities he was also timid, dependent, selfish, domineering and vindictive. All these qualities stood in striking contradiction to his outward behavior which was highminded and magnanimous. But already in his third year his sadistic and masochistic inclinations showed themselves. The patient found great pleasure in picturing to himself, in dramatic fashion, phantom people, mostly women, undergoing pain or distress, as did Griselda in the legend. Often these people were condemned to bear burdens far beyond their strength, or work incessantly for an unlimited time, or undergo similar distress. Acute pain was not assigned at first although later they were thus condemned. As the patient grew older the entertaining of an idea of acute pain would instantly bring on a seminal discharge. Often a part of the suffering inflicted on these imaginary people was that they were not allowed to empty their bladders. It is worthy of note that these sadistic thoughts, which always gave a certain satisfaction, were already indulged in as early as his fourth or fifth year.

The patient got pleasure out of his phantasies long before he knew they had any relation to onanism. But with the beginning of puberty he noticed that he invariably got an ejaculation with a phantasy of acute pain. When he came to the pain in his phantasy instantly he had the ejaculation. This discovery put him in the pos-



session of a method of prolonging his pleasure and at the same time postponing the unwished-for end of the process.

The principal interest in the case lies less in the facts than in the significance these facts have for the source of the personality and more permanent characteristics of the patient. It needs but little investigation to show that all these conflicts which the patient had against his daughter were but the revivification of the impulses of his earlier day-dreams. From this point of view it is interesting that the patient himself chose Griselda as the pattern for his dreaming.

The phantasies of the post-puberty stage played a very important and practical part in the patient's married life. Although he was very happily married, the presence of his wife, even caressing her, would give him no erection. It was not until he called his childhood dreams to mind, at times of attempted coitus, that he could get any erection or have successful intercourse. The successful moment came just at the time when he would think of the pain.

Some dreams will now be given illustrating especially clearly characteristic traits of the patient.

#### FIRST DREAM.

"I was at table, not in my own house, but in one similar to the country house in which I passed my childhood. Someone passed me a bit of bread I took it, spit it out, and laid it again on the plate; but then I took it up again."

After association the patient thought the spit probably represented semen and the bit of bread was to be passed by him to his daughter. In a sense the act was an insulting one and he remembered occasions when he had treated his mother, as child, in similar fashion or had felt inclined to do so.

#### SECOND DREAM.

"I was on a ship with side wheels. My children,—my daughter and one of her brothers,—were playing cards in the cabin. There were perhaps others there. I called my son (thus forcing him to desert his sister) and asked him to have a game of shuffle-board with me on deck. He came, but we did not play after all. One of the disks fell into the paddle wheels in such a way as to stop the engines and bring the ship to a stand-still. I climbed down, while the others all remained on deck, and thus found myself at the 'center of power' (onanistic). Then the paddles began to go around and I awoke."

The wife of the patient was a spectator and had questioned him. In other words the patient had put his children to discomfort and had

then gone away in order to make it appear that he could use his own power in some other way alone.

### THIRD DREAM.

"I was at the theater as a spectator and yet at the same time I seemed to be one of the actors, and also it seemed to be a bit out of real life. A young woman (probably a substitute for his daughter) and I appeared to be the principal personages. Without knowing why I became angry against the girl, tore a ring from her finger, likewise one from mine, threw them on the stage and trampled on them. Then we seemed poor and needed some money for something. I went out in order to get money and it seemed as if I had pawned my watch and came back. There were others on the stage. I called Robert (his son, much loved, and who likewise had a strong feeling for his sister). I had a small pistol which I handed to the girl, from whom I had torn off the ring, saying: 'I cannot be trusted with this, take it.' At this moment the pistol went off and struck her. Others on the stage were also wounded. I was in mind to give myself up to the police. The girl accused me of being a criminal, but then changed into an older person, apparently my wife, or mother, and took steps to suppress the whole affair. (One thing she started to do was to cut off the hair of all the women on the stage)."

Without going deeper into the dream it is seen that the patient was ruled by conflicting emotions. The tearing off of the ring; the altruistic feeling, as shown by the pawning of the watch; the pistol scene, the repentance, the anger of the maiden; the unselfish love of the mother, or wife; the cutting off of the hair; all show unmistakably a play of feelings which have been illustrated in detail in the patient's onanistic phantasies and his life history. The whole life of this man had been more or less consciously permeated with a feeling of mental inferiority and masochistic self punishment. The sadistic tendency can be considered as a protest against these characteristics, which, according to the law of ambivalence, is the obverse of the masochistic inclinations.

Either such a man brought with him into the world his masochistic, or opposing, inclinations, or in comparing himself with other men produced a feeling of inferiority. "I am of the opinion we all discover a feeling of inferiority, or of the opposite, when we, if only half consciously, strive to express ourselves in any way." Just as the problem of "Evil" is regarded as the origin of all philosophy, so the feeling of inferiority, the masochistic feeling, may serve as the lever with which one brings himself to sublimation.

The mode of looking at the subject here suggested puts the libido question in a different light from that in which it is ordinarily seen. It is plain that the conception of libido regarded as an active form of energy is that of an immaterial self-renewing process, or force, which in reality is quite analogous to what, since Plato, has been spoken of as self-activity.

The first real step in solving the riddle of the whence and whither of the universe, of existence, of life, is taken when all the phenomena are reduced to one principle. This unity, however, must be capable of dividing itself to be able to explain the variety of personality; it must be able to regard itself as at once object and subject. This is true libido, and we must get back to this metaphysical conception before we can explain all that the libido concept is adopted to account for. Deeper than this one can not go, for this process of self-division, like the biological prototype of the division of the cell, of the sexes, etc., is the most fundamental part of all nature.

It is also evident that the problems of self-assertion and self-abnegation, and others of like sort, have a similar metaphysical root, which is founded in the necessity that the mind is under to seek some particular determinate form of self-expression at each instant, yet at the same time to recognize that any given effort of self-expression is imperfect, and must be temporarily abandoned in favor of a return to the assertion of a universal form. This has an obvious relation, again, to feelings of ineffectiveness, such as were experienced in large measure by this process.

2. *The Significance of the Grandfather.*—Every one remembers the work of Jung on the significance of the father for the individual. Jones thinks the influence of the grandfather deserves, perhaps, even greater attention because here can be found an explanation for many characteristic tendencies and neurotic reactions. There are certain weighty points in which the figure of the grandfather repeatedly differentiates itself from the father-image. In the first place it is much older than the other. It serves in his phantasies as a satisfying substitute for the father, at a time when the boy begins his family "romancing" and seeks to shake off his real father. As is known since Rank's studies the substitute is always invested with the characteristics of the father. The grandfather therefore is especially important because of his similarity and relationship with the father. This will often be aided by the greater fondness and tolerance which mostly marks the practice of an older man towards children. Many a strict father becomes later an indulgent grandfather, in part perhaps because of his feeling of responsibility for the education of the child being blunted by the philosophy of age. As the child grows, the already established



association becomes stronger through the still greater similarity of the father with the memory image of the grandfather. A deeper ground for this association is the following: In very many children there is the wish to be the parents of their parents, and thus they have the phantastic belief that as they grow larger their parents grow smaller until their respective positions are reversed. This phantasy construction, which is probably one of the sources of the belief in the reincarnation, has obviously intimate relationship with incestuous wishes, for it is an exaggeration of the frequent wish to be one's father. An amusing approximation to the realization of this phantasy takes place when, as is occasionally the fact, a father and son marry a daughter and mother. The son becomes thus the husband of his father's mother-in-law, that is, so to say, the father of his father and the matter will occasionally be mentioned in the newspapers under the head: A man becomes his own grandfather. In the case of the grandfather on the mother's side there comes in play a wider factor. If the mother, as is so often the case, is excessively attached to her father, the son feels instinctively that his grandfather is his rival with his mother, perhaps more even than his father. There arises then an Edipus situation in which the role of Laios is taken by the grandfather.

The study, so far, has been only from the point of view of the boy; but it is quite similar for the girl. Here, also, the grandfather is a substitute for the father. In the above mentioned phantasy, which we may call the "reversed parentage" phantasy, the girl, when she makes herself the parent of her mother, becomes the wife of her grandfather, just as the boy becomes his grandmother's husband. In the Christian religion there is a commandment which says: "Thou shalt not marry thy grandfather (or grandmother)." No religion forbids with exactness what no one wishes to do.

One of the most striking of the results of the "grandfather-complex" is a fondness for old people. One needs only to remember the noticeable love which many women, and especially young women, show for old men. As I write I hear of the marriage of a man of 84 with a girl of 19, where money played no part. Unusual interest in the family tree and the forefathers goes back to this complex, although the inquisitiveness as to the problem of birth is perhaps a more general source. It is a well-known fact that in eastern countries where old people are especially honored and treated with unusual submission, there is some form of ancestor cult manifesting itself either directly as the worship of ancestors, or as a holy reverence for them.

It is often noted that many boys take after their grandfather, either in single characteristics or in the total character. The frequency of the case in which a boy is like his grandfather is so great

that there are many proverbial phrases showing it. Especially in the study of genius, it is enlightening to note how much oftener the series, "mediocrity—genius—mediocrity" or "genius—mediocrity—genius" takes place, than that genius follows genius immediately. The influence of the grandfather is not only physical but also mental, for the figure of the grandfather can become the center of the innermost interests of the grandchild.

An interesting product of the above mentioned "reversed parent" phantasy is closely related to our subject. It becomes namely one of the sources of the incestuous inclinations of parents for their children, also for normal parental love and for pædophilia in general. It has been regularly observed that a man who has an abnormally strong feeling for his daughter, also shows an equally strong infantile fixation on his mother. In his phantasy he begets his mother, becomes her father, and later identifies his daughter with his mother. In the psychic life the present generation becomes the past and the future melts into an unity, thus in phantasy past and future are treated as identical and are all mixed up with each other. Thus mother-complex, and daughter-complex, likewise father and son-complex, stand in close relationship. This holds equally for other emotional ideas, thus love, *i. e.*, for hate. The case of the Cenci is an excellent illustration in point.

In conclusion, one word for a very neglected member of the family—the unmarried aunt. The author had many patients whose interests and inclinations were centered in this figure, who in consequence had a tender feeling for all elderly virgins. One, especially, fell in love with every unmarried virgin over forty years old with whom he came in contact. The meaning of this is clear: the unmarried aunt is the substitute for the virgin mother, an idea which has been very important to many religions. One can venture to generalize, that all parts of the family group, from brother to grandfather, from sister to aunt, are but substitute images of the original three in one, formed by father, mother, and child.

3. *The Rôle of Grandparents in the Neuroses.*—Many neurotics and psychoneurotics constantly speak of their grandfather or grandmother, although they may have had no decisive influence at all on their lives. These patients vary, yet one can formulate a common result: The especial emphasis of the grandfather or grandmother is rooted in a declination of the father or mother. Two illustrations from the life of a well, or only slightly neurotic, boy will show this clearly. The boy had a typical phantasy of being a prince over one of the kingdoms of the earth. The king had the same qualities as his father, for whom he had a great respect. Later he gives to this king

a father, for he can do such things just by the power of his words, *i. e.*, he possesses a god-like omnipotence. The result is clear: The father, who in the eyes of the small child is omnipotent, will have a still more powerful superior, who will contest his omnipotence. It is to be noted that the boy did not know his grandfathers; the grandfather-like form therefore was created by his phantasy. The same boy got into trouble once with his mother. In tears he declared: "Now I will marry my grandmother." The boy played his grandparents against his parents. "Grossvater," "grandfather," "grand-père," and other similar names, permit us to imagine that the child was only repeating in this valuing of the grandparents, what mankind had done since the beginning. The child used the word in its original sense, as in so many other cases. We remember the behavior of this boy when we consider from the psychoanalytic point of view the case of a young man suffering from dementia præcox. In his hallucinations and delusions his grandmother (maternal) played an otherwise not-understandable rôle. The patient often spoke of a continually recurrent vision of his great-grandmother.

As a small boy the patient was in a quite unusual degree attached to his mother. He watched her with such jealousy that she could hardly pay any attention to his father or sister. When later the psychosis became more and more manifest the patient showed the most obvious enmity against his mother. Whereas the patient had been completely dependent on his mother, now, in his psychosis, he felt himself ruled by his grandmother. She appeared before him in order to give him commands or prohibitions. The patient had a lasting enmity towards his mother. He did continually what in the first example (the well boy) was only a passing feeling: he displaced his mother by his grandmother. Here is manifested the over-determined psychical reaction. The patient can direct with less inhibition his wild words of abuse against his grandmother and great-grandmother, who is not flesh and blood to him, than against his mother, to whom, at bottom, he is still attached.

A patient with a compulsion neurosis, who showed in many ways a strong aversion to his father, substituted, in his phantasy, his maternal grandmother for his father. He was brought up by his father, who lived in modest circumstances, in puritanized fashion. He visited his grandfather once in his home with his mother. The old gentleman, who was well-to-do, was overjoyed at the visit of his grandson and showered him with presents which cost, as it seemed to the boy, huge sums. From this time on his antagonism to his father took definite form. His father more than ever seemed to him a tyrant, while his generous grandfather was raised to an ideal-father, or father-ideal.



During the psychoanalytic treatment the patient had a dream in which he seemed to be traveling, with his mother, to visit his grandfather (long since dead).

Psychoanalysis teaches us to recognize many ways taken by neurotic phantasies in order to paralyse the power of the father or mother complex. One can put these phantasies in three groups. The farthest reaching among these phantasies are the ideas of removal. It is well known how manifold are the ways in which the wish of death against father or mother find expression in the neurosis.

A second group of ideas serves as a denial of the parents, especially often, the father: so-called phantasies of parentage.

Finally, the neurotic seeks to keep off the parental complex by diminishing the power of the father or mother. A diminishing is accomplished when a more powerful is substituted.

One must remember that many neurotics have a strong aversion, conscious or unconscious, against any authority in others. Resistance against the doctor not infrequently manifests itself in this way during a psychoanalytic cure.

The religious feelings of many neurotics finds its source essentially here. The belief in a god-like omnipotence, or a predestined fate, for mankind, comes from a feeling that the father, to whom the neurotic feels inferior on account of his unconscious fixation, is not all-powerful, but that there is a still higher power.

In conclusion the author refers to an analogous phenomenon in folk-psychology. The transference of authority from father to far-removed forefathers is the ground of ancestor worship. The individual really does not worship a single ancestor but a great company of men invest a common fore-father with a power which has as its model fatherly authority.

4. *The Grandfather Complex.*—The author finds that the grandfather engages the phantasy of the child in a double way. On the one hand he is the imposing old man, to whom even the all-powerful father pays homage, whose authority he hence adopts. But on the other hand he is the helpless, weak, old man, near death, no match for the powerful father (especially in sexual things), and therefore an object of contempt for the child. Very often it is precisely in the person of the grandfather that the child meets first the problem of death, that final disappearance of a member of the family, and thus he can shift his enmity, or repressed phantasies, over the death of his father, to his grandfather. "If the father of my father can die, then my father can also die (and I can come into possession of his privileges)": thus, perhaps, runs the phantasy which conceals itself behind surface memories and surface phantasies, busying themselves with

the death of the grandfather. Through the death of the grandfather, moreover, the grandmother becomes free. Many children grasp now the expedient (in order to save the life of the father and still be able to possess the mother alone) of having the grandfather die, in phantasy, in order that the grandmother may be given to the father and they possess the mother themselves. "I sleep with my mother, you should sleep with your mother," thinks the child and believes himself thus just and generous. Whether the image of a "weak grandfather" or a "strong grandfather" fixes itself on the child, depends on the rôle actually played by him in the family.

Where the grandfather rules the house the child in his phantasy goes above the powerless father and hopes to inherit directly the whole power of the grandfather. In a case, psychoanalyzed by the author, the child could not subordinate himself to the authority of his father after the death of his grandfather. He regarded his father as a usurper who had robbed him of his rightful possessions.

The image of the "weak grandfather" stamps itself especially sharply on the children of those families in which (as is often the case) the grandparents are not well treated.

5. *Reduction of Motives of Repression through Recompense.*—Freud's discovery that the forgetting of ideas is always conditioned by a motive of unpleasantness, raises the correlative problem: How is it that the repressed idea comes back into consciousness after a series of free associations? Has, perhaps, the idea lost its unpleasant tone during the course of the association, or has the unpleasantness lost its character as a motive of repression? The answer, according to Freud, would be: the subject chooses a less displeasure—the displeasure which is bound up with the reproduction of the repressed idea—to escape a greater unpleasantness which arises through the inhibition of thought activity. In so far as it concerns the psychical failure of normal consciously purposive thinking might one well desire the power needed for successful psychical processes; the power to overcome the resistance against the memory of an idea due but repressed. The parallel with the neurosis is obvious. Here it is the illness which provides the desire for health and this leads to the overcoming of the repression. In all cases we see that the escaping unpleasantness, which is the aim of the resistance, is relative: the overcoming of the resistance is accomplished through diminishing of the motives of repression by threatening greater unpleasantness on account of prohibiting consciously purposive thinking.

A purely psychological consideration finds the problem in the fact that the reproduction of the repressed idea comes after a definite number of associations. Why does the idea come at one rather than

another place in the series, after a greater or less number of associations.

The choice of the psychical reaction determined by the endo-psychic censor is independent of the value of the reaction for purposes of social communication or of orientation in the outer world. The distribution of consciousness over ideas takes place according to the principle of pleasantness or unpleasantness, which is determined according to the law of the individual psychical development, a correlate of the development history of human instinct in the individual.

The author has observed that in very many cases in the association series immediately before the reproduction of a forgotten idea an association appeared combined with a pleasant affect. This pleasant idea is of such sort, that it, like a payment on account, rehabilitates the self-consciousness of the subject, which is depressed by the repressed idea. The subject gives himself a recompense before he surrenders to the fact, depressing to his self-consciousness. Through this recompense the motive for repression is weakened and the resistance against the reproduction of the unpleasant idea is diminished.

The author gives the following illustration:

He was speaking with Mr. H. about the sexual life in their times. Mr. H. was just about to tell when he first became acquainted with the fact that there was a commercialized prostitution.

He said "When I was 16 years old I learned from a schoolmate that there were such women in . . . now I can't remember the name of the street which my schoolmate told me there."

The following free association was given to clear the way for the forgotten idea.

1. "It was the name of a battle," and then he remembered three names.

2. Lissa, Custoza, and Canossa.

3. The victor at Lissa, Tegetthoff, his memorial is in the second district, Vienna. In the same district there is also a Custoza street.

4. At Lissa and at Custoza the Italians were besieged by the Austrians. Now I remember that one history professor in the Untergymnasium always painted the Italians as bitter enemies of the Austrians.

5. I have recently had a woman colleague, who thought I was an antifeminist, say that as to the emancipation of women I had gone a long way towards Canossa.

6. To go to Canossa means to ask pardon, to excuse oneself. Now I remember an historical event at Canossa: The Pope on a balcony with the Duchess Mathilda, and below, barefooted, in the snow, King Henry IV, Bourbon.



7. Tannhäuser had to make a pilgrimage to Rome barefooted.
8. The Venusberg in the opera of Tannhäuser.
9. The Ninth Symphony.
10. To be embraced by millions. The text is by Schiller; the phrase has indeed a voluptuous character.
11. The verse of Schiller's: A Campaign it was, not one battle to win.

12. I wrote this phrase to a colleague instead of an account of my examination. The examination had been almost a defeat for me.

And then the author goes on to state that suddenly the anxious expression, the tense psychical state of Mr. H. changed into an expression of relief as he remembered the forgotten name: The street was called Novara-Gasse and it was in the second district.

In answer to the question as to the affect associated with this name, Mr. H. said: "After I heard there were prostitutes in Novara-Gasse I went there. A dirty old prostitute spoke to me and called me 'Bubi.' At that time I didn't know it was also used with grown men, and I took it as a criticism of my youthful appearance. My pride was touched and the pain increased by a feeling of its truth. This feeling, in combination with my consciousness of being on forbidden paths made my first attack on the battle field of love a complete failure. Then came the disgust inspired in me by the woman. I gave her no answer and quickly went away. It was a very unpleasant experience."

The forgotten idea thus was associated with an unpleasant affect. The associations led finally, to the pleasant memory of a successful examination. With success in the spiritual realm one can please an "emancipated" woman and with such success one could perhaps eventually win a wife. His masochistic tendencies would perhaps not be so inhibitory in the future as they had been in youth in the "*Novaragasse*." With this pleasant thought, this recompense, came the forgotten idea.

6. *A Little Human Rooster*.—This study concerns a five year old boy, who, according to the unanimous report of his relatives, had developed perfectly normally in mind and body till he was  $3\frac{1}{2}$ , and was a quite normal child. He spoke easily and showed much intelligence in his speech.

All of a sudden he became quite changed. In the summer of 1910 the family went to an Austrian watering place, where they had been the summer before, and established themselves in the same house. From now on the child changed in a striking way. Earlier interested in everything going on in and out of the house that could attract the interest of a child, from now on he was interested in

only one thing and that was the hen-house in the yard. The first thing in the morning he would run to see the poultry, observe them with undiminished interest, imitate their voices and actions, cry and weep if he were taken out of the hen-house by force. Away from the poultry yard he would do nothing else but crow and cackle. He would do this by the hour; answer questions with only this voice; so that his mother became very worried lest her boy should forget how to speak.

This peculiarity of the little boy lasted while they were at the summer residence. When the family returned to Budapest he began to speak like a human being again, although the subject of his conversation was almost exclusively about cocks, hens, fowl, above all about geese and ducks. His usual daily play, repeated innumerable times, was the following: he crumpled up a newspaper into something like the shape of a hen, offered it for sale, then he took any object (most often a small hand whisk brush) which he called his knife, took his "bird" under the water faucet (where the cook really killed poultry) and cut off the head of his paper hen. He showed how the hen bled and imitated by voice and action the death struggle of the fowl. If fowl were offered for sale in the court, he would run restlessly in and out of the door till his mother had bought one. He wishes obviously to be a witness of its slaughter. For living hens he has, however, not the slightest anxiety.

The parents have questioned the child innumerable times as to why he was so afraid of a rooster and he always told the same story: he had gone to the hen-house once and had urinated there. A hen or capon with yellow (often he said brown) feathers had come and picked his member and Ilona, the maid, had bound up his wound for him.

Now the parents remembered an occurrence which happened the first summer they were in this watering place, hence when the boy was  $2\frac{1}{2}$  years old. His mother heard the little fellow cry out one day and learned from the house-maid that he had been terribly frightened by a hen which had snapped at his member. Since Ilona no longer worked for the family, it could not be learned whether he was really wounded or (as the mother remembered) whether Ilona provided him with a bandage merely to quiet him.

The noteworthy thing about the case is, that the psychical after-effect of the child's experience took place after a latent period of a year, on his return to the summer place, without, in the meantime, anything occurring that could explain this sudden return of anxiety in the presence of poultry or explain his interest in them. It was questioned as to whether the child had not masturbated during this

latent period and on that account been threatened with having the member cut off. The answer, only unwillingly given, was that the boy (now 5 years old) did play with his member with much pleasure, and had been often punished for it, and that it was not improbable that some one had jestingly threatened him with cutting it off. It was also true that he had had this bad habit for a long time, but whether he had it during that latent-year no one knew.

As it was found later that the boy had actually not been spared this threat, one was warranted in holding to the probability that it was hearing this threat during the latent-time which had aroused such an enormous response, as well as the endangering of the welfare of his member by his seeing again the place. Naturally a second possibility is not excluded, namely, that the first shock was over-emphasized by previous threats of castration. Unfortunately the time relation can not be reconstructed and we have to be contented with the probability of the original casual relations.

It was impossible to conduct a direct psychoanalysis. What we learned was through a neighbor and friend of the family.

He could cackle and crow in a masterly manner, and used to awaken the family, like Chanticleer by lusty crowing in the morning. He was musical, but would sing only folk-songs in which there were cocks or hens. He could draw, but drew birds with great beaks exclusively. Thus he tried to sublimate his pathologically strong interest.

His feeling for poultry was ambivalent: he liked to see them killed, etc., but he often kissed and stroked the dead fowl. Once he threw his indestructible doll (a hen) down in a rage but immediately picked it up again and caressed it.

From psychoanalytic study of mature patients it has been learned that the cock in a symptom complex means the father.

He was very much interested in the sex of every fowl killed, and it had to be explained to him which it was, cock, hen, or capon.

There is no doubt that in his mind a rooster, hen, and chicken stood for the family. "My father is the rooster," he said once. "Now I am little I am a chicken. When I grow bigger I will be a hen. When I grow still bigger I'll be a cock. When I am biggest I'll be a coachman." (The coachman seemed to him more important even than his father.)

One morning he questioned the neighbor: "Why do people die?" (Answer: because they are old and tired.) "Hm! Then my grandmother was old? No! She was not old and yet she died. O, if there is a God why does he let me fall? (He means stumble.) And why did he fix it so that men should die?" Then he began to



interest himself in angels, whereupon the explanation was made that that was only a fairy story. He became quite terrified and said: "No! That is not so! There are angels. I have seen them carrying dead children in heaven." Then he questioned, "Why do children die?" "How long can one live?"

It turned out that that same morning, early, the chambermaid had turned back his bed-covering quickly and had caught him manipulating his member, whereupon she had threatened him with cutting it off.

Now we understand better his unappeasable anger against the rooster which had tried to do the same thing with his member. We can understand also the gruesome character of his sadistic phantasies.

### Zentralblatt für Psychoanalyse

ABSTRACTED BY DR. C. R. PAYNE,

WADHAMS, N. Y.

(Vol. 2, Nos. 10, 11)

1. Contribution to the Psychology of So-called Dipsomania. DR. OTTO JULIUSBURGER.
2. Concerning a Ceremonial before Going to Sleep. DR. WILHELM STEKEL.
3. Lecanomantic Investigations. HERBERT SILBERER.
4. Concerning Transitory Symptom Formations during the Analysis. DR. S. FERENCZI.

1. *Psychology of So-called Dipsomania.*—In qualifying the term, dipsomania, by the adjective "so-called," the author wishes to indicate that he does not consider dipsomania a definite, sharp-cut clinical picture. He surveys briefly the prevailing views concerning the condition held by Kraepelin, Gaupp, Aschaffenburg, Ziehen, Wernicke and others and seems to agree most nearly with Wernicke who holds that a real periodicity is demonstrable in only a few cases, that the attempt to classify the condition with the periodic manias has been unsuccessful, that there is an interruption of the continuity of the consciousness of the personality; certain hypervalent ideas act on the personality so that a changed and lower grade character results.

Having thus sketched the conceptions of dipsomania, Juliusburger describes and discusses a case which came under his observation: The patient was a young married man who had the habit of going to a certain restaurant, always the same one, kept by an uncle of his wife,

drinking beer and wine a large part of the night and then going with the uncle to another place where they further drank and caroused. These attacks usually lasted a night and a day and sometimes half of the next night and varied in frequency from twice in eight days to every four weeks or longer. The condition had lasted about five years. Patient had been married two and a half years when he came to the institution. Concerning the man with whom he went on these drinking sprees, the patient said: "I am fearfully fond of going there, am quite crazy about the fellow—I am not a pervert—the inn-keeper has been there five years. I have gone there, felt myself attracted." During the drunken state, the patient was more inclined to masturbate than to have normal sexual intercourse. The author points out that the phenomena seem to center around an underlying homosexuality. Although the man was heterosexual, still he had a strong homosexual component; when this component found a suitable object, it was strong enough to break through the repression and find gratification, the alcohol acting as an agent for breaking down the repression and sublimation.

2. *Ceremonial before Going to Sleep*.—The author describes in considerable detail the complicated obsessional ceremonial which one of his neurotic patients felt compelled to go through every night before retiring and also at other times of the day. These obsessions were largely in connection with excretory functions but also included such things as making sure that doors and windows were closed, the light turned out, etc. He also gives the analysis of the various acts and traces them back to anxiety over ideas of pregnancy, infanticide, virginity, etc. He emphasizes the points that (1) Every obsessional act contains a death clause; (2) every obsessional act fulfills an infantile imperative; (3) every obsessional act serves to unite mentally, anxiety and doubt; (4) the obsessional acts are carried out by religious motives, they contain prayers which seem fused with criminal complexes by means of neurotic compromises to form mental symptoms.

3. *Lecanomantic Investigations*.—In this number, Silberer concludes his article on the psychoanalytic investigation of lecanomancy which has run through four numbers of the *Zentralblatt*. Lecanomancy is a method of divination by means of a suitable person looking into a bowl half filled with water, on the surface of which the indefinite images of candle flames are reflected (in Silberer's experiments, three candles were used). The person who acted as medium was a young Jewish girl in her early twenties. After each group of visions reported, Silberer used free associations to find the meanings of the same. These investigations are very interesting as showing how the divination are merely the results of the medium's own com-

plexes and are well worked out although the series was interrupted by external conditions before Silberer could complete them. The close relationship between the visions and dreams is well brought out. The visions and analyses cannot be followed in detail here.

4. *Transitory Symptom Formations during the Analysis.*—(Transitory conversion, substitution, illusion, hallucination, “character regression” and “displacements of expression.”) In a few pages crammed with valuable hints for the practicing psychoanalyst, Ferenczi describes some of the temporary or transitory symptoms which patients develop in the course of their analyses and tells how he overcomes and dissipates the same. One patient developed a sudden toothache, another a tremendous drowsiness when the analysis struck unpleasant ideas. These symptoms promptly disappeared when the cause of them was made clear to the patient. Sudden mental suffering is often expressed by temporary cardiac pains, emotion of exasperation by bitter taste on the tongue, cares by pressure in the head. Temporary asthenia of the whole musculature often appears as a symbol of moral weakness or unwillingness to explain an act.

Transient obsessional phenomena can also appear during the analysis: One obsessional patient, during free associations, suddenly developed a questioning as to why the letters w-i-n-d-o-w should stand for the object, window. No amount of explanation could free him from this question to which he continually recurred instead of proceeding with the associations. Ferenczi discovered that this symptom disguised the patient's disbelief in the analyst's previous interpretation of a symbol. In exceptional cases, hallucinations may be formed: One of his patients, when the analysis reached unpleasant things, would suddenly drop the associations and produce true hallucinations of anxious content, struggles with wild beasts, scenes of violence, etc. These proved to be a means for preventing certain unconscious material from becoming conscious.

Illusions of special senses, especially smell, also develop frequently. Temporary regressions of character, as for example, to onanism, may occur in the analysis. This is especially apt to occur when the patient feels unsympathetically treated. Displacements of expression are illustrated by yawning for sobbing, coughing for speaking something unpleasant or sometimes for laughter. All of the transitory symptoms enumerated afford the analyst valuable data regarding the resistance and transference, and upon the correct interpretation of these often depends the success of the analysis. These symptoms further afford a glimpse of the mechanism whereby neurotic symptoms in general are caused; when repressed complexes threaten to



become conscious, if the censor is unable to keep them repressed, it may divert a part of the energy along new paths to a distorted expression. The author aptly calls these transitory symptoms, "neuroses in miniature."

(Vol. 2, No. 12)

1. Three Romances in Numbers. DR. J. MARCINOWSKI.

2. Experimental Dreams. DR. PHIL. KARL SCHRÖTTER (Vienna).

1. *Romances in Numbers*.—As the title indicates, this article gives three illustrations of unconscious manipulation of numbers. The subject of the first dream was a woman who as a child had been extremely fond of playing mentally with numbers, assigning a number to each letter of the alphabet, a-1, b-2, etc., and then spelling out words in numbers. In the dream reported and in the interpretation of this which the patient herself gave during hypnosis, we have a wonderfully good picture of this strange phenomenon which is by no means so rare as one is inclined to think at first. The patient depicted in numbers her most important complexes and greatest conflicts and even showed an assimilation of some of the unconscious elements. The other two dreams reported are similar to the first with the exception that the patients had not been accustomed to play with numbers, consciously at least. They display the same mechanisms as the first.

2. *Experimental Dreams*.—This is a short preliminary sketch of experiments which the author has conducted in causing dreams artificially by hypnotic commands and studying the resultant productions. The results are very interesting and also important as substantiating many of the facts derived by Freud from observation. The method of experiment consists in giving to the person in hypnotic sleep, the command to dream something definite, from three to seven ideas being given as subjects to dream about. One of the clearest confirmations of Freud's views was the fact that when the command was to dream something grossly sexual, the resulting dream was expressed symbolically; in other words, there was the "manifest content" from which the "latent content" must be interpreted. It is expressly stated that the subject of the experiment was ignorant of Freud's investigations and had no suspicion of the meaning of the dreams. Other phenomena which could be observed were the effect of clang association, the dream instigators from daily life, the effect of bodily irritations and the action of transference. It would seem that the method promised much help in elucidating the problem of dreams.

## Imago

## Zeitschrift für die Anwendung der Psychoanalyse auf die Geisteswissenschaften.

ABSTRACTED BY DR. T. S. VAN TESLAAR,

OF BOSTON, MASS.

(Vol. I, No. II)

1. The Rôle of Philosophical Views and Training in the Further Development of the Psychoanalytical Movement. PROF. JAMES J. PUTNAM.
2. Feeling for Nature. DR. HANNS SACHS.
3. The Psychology of Dramatic Construction. LEO KAPLAN.
4. The Evolution from Pathography to Psychography. DR. J. SADGER.
5. Symbolism of Tairy Tales. HERBERT SILBERER.
6. Psychoanalytic Observations on a Journey through England. DR. ALPHONSE MAEDER.

1. *The Rôle of Philosophical Views and Training in the Further Development of the Psychoanalytical Movement.*—This paper, read at the Third International Psychoanalytical Congress, held at Weimar, discusses the wider philosophical implications of psychoanalytical theories.

The current theories of psychoanalysis owe their efficiency chiefly to the biogenetic viewpoint which psychoanalytic practice implies. Putnam advocates a clearer recognition of this underlying biogenetic principle. Psychoanalysis would be the gainer if we should recognize, once for all, that not the external physical series of events but the internal processes constitute the crux of life. True, Kant has pointed out the helplessness of all metaphysics as a scientific discipline; it may be that, for fundamental principles, we must content ourselves with conceptual artefacts and symbols, but science, too, makes use of similar artefacts and symbols of thought so long as they help the conceptual treatment of our experiential data. Of course, physical and psychic process may be reasonably conceived as but two sides of the same existence, not unlike the convex and concave sides of a lens, as, indeed, Fechner contended they must be. Whatever the view which the psychoanalyst may feel justified to embrace Dr. Putnam conceives that it is his duty thus to square

principles and practice with reference to some definite fundamental conception about life and the world processes about us.

2. *Feeling for Nature*.—A psychoanalysis of the esthetic phenomenon loosely termed feeling for nature (*Naturgefühl*) on the basis of two widely divergent examples, Homer and Goethe, and therefore typical of two totally different aspects of this emotion.

As would be expected the attitude towards nature of the ancients differs in many radical respects from ours. For one thing the Homeric *Naturgefühl*, for instance, is characterized by a greater tendency towards personification of natural objects and qualities, a phenomenon particularly characteristic of the animistic stage of thought. The origin of this mental attitude is traced by the author back to the very early narcissistic libido of the individual.

The stage of thought immediately following the animistic attitude is brought about through a gradual change from the narcissistic libido to the love of objects and in this transition may be found the primordial type of repression.

The attitude towards nature of the ancients presents the following salient features: all pleasurable emotions evoked by nature in its manifold aspects are sexualized, in the sense that all such emotions are linked up with and derive their particular meaning from their admixture with the predominating libido of the subject. The unpleasurable emotions about nature, through which, of course, the principle of reality breaks into recognition, blend and form the anxiety affect. Thus a new means is established for the possible release of sexual tension. Of course, the tendency to personification rests upon a foundation typically affectivistic. On the basis of these considerations Sachs throws interesting side lights on the origin and meaning of animism.

In contrast with the ancient attitude which concerned itself largely with the object of the feeling for nature, the modern attitude towards nature accentuates the feeling itself. The object back of it stands out less ominously. But the relation of this feeling to sexuality is none the less clear, as has been pointed out long ago by Freud himself. Although we no longer personify inanimate objects and natural phenomena as grossly as did the ancients we still transfer our "emotions" and "moods" over to nature. Part of our repressed sexual cravings find their expression in this emotional vivification of nature.

3. *Psychology of Dramatic Construction*.—The analogies between ordinary dreams and poetic constructions are very numerous. The author illustrates this and the fact that the psychic motivation of the two is the same by the use of a number of examples.



The "Prometheus Bound" epic of Aeschylus is very much like a dream in its psychic mechanism. The rôles of Elizabeth and Venus in Wagner's "Tannhäuser" illustrate the ever prevalent dualism of the erotic impulse—a dualism which Kaplan traces also through the personal life of Wagner.

The "Agamemnon" of Aeschylus and Ibsen's "Baumeister Solness" depict at bottom, the conflict between the polygamic tendencies still active in man and the socially imposed necessity of conforming to a monogamic theory of sexual ethics.

4. *The Evolution from Pathography to Psychography.*—A cursive narration of the development of our knowledge concerning the psychical motivations of genius with particular reference to the improvements in the methods of study brought about through psychoanalysis.

Previous to Freud and his school this branch of "applied" psychology was in a state bordering on confusion. Hebel's poetic drama "Judith" is chosen as an example and the results obtained by the old method of pathography, largely worthless, are pointed out and contrasted with the psychoanalytic method of approach and its results. With the aid of the latter method we arrive at a definite understanding of the psychic motivations back of the drama and we may learn to appreciate the mental aspect of every detail in its construction.

5. *Symbolism of Fairy Tales.*—Dreams and fairy tales represent alike wish fulfillments. A number of dreams reported to Silberer are analyzed and the results compared with similar analyses of fairy tales and myths, the latter based on the work of Abraham and Riklin. The agreement between them is very striking.

6. *Psychoanalytic Observations on a Journey through England.*—An attempt to approach racial psychology through psychoanalytic principles. The observations are casual. A number of English traits are considered but without attempt at thorough treatment.

The author finds that the women's suffrage movement in England and the "mannish" tactics assumed by many of the English militants are the end results of long continued repression. The prevalence of dancing, sport, and hero-worship generally, also the over-valuation of self observable in England are narcissistic manifestations which furnish various collateral paths for the vicarious satisfaction of repressed libido.

## BOOK REVIEWS

DAS INZEST-MOTIV IN DICHTUNG UND SAGE. GRUNDZUGE EINER PSYCHOLOGIE DES DICHTERISCHEN SCHAFFENS. Von Otto Rank. Franz Deuticke.

This is a very complete and exhaustive psychoanalytic production from the pen of one of Freud's most gifted followers.

It is fairly well known that the so-called "nuclear complex" of Freud centers about the unconscious relations of the young child to its parents. This is frequently spoken of as the "Œdipus complex" since in the time of Æschylus and Sophocles the problem was handled with fairly patent symbolisms in the drama of Œdipus Rex. Even at this time, however, the mechanisms of displacement were a part of the poetic construction and the unconscious poetic phantasy of this period of culture was a highly specialized and complex creation.

Rank has set himself the difficult task of tracing through the works of modern and ancient writers, the individual roots of the Œdipus complex and the various ways in which poetic creation has utilized the motive in the gradual evolution of the social psyche away from the concrete towards the symbolic expression of the same.

He first discusses typical dramatizations of the motive, such as Œdipus, Don Carlos and Hamlet. Schiller's work then is taken up and is followed by a complete working over of the stepmother situation, made known to psychoanalytic workers, particularly in Ricklin's study on fairy tales (see PSYCHOANALYTIC REVIEW, Vol. I, No. 1, translation by White, and the Myth of the Birth of the Hero; vide *Journal of Nervous and Mental Disease*, 1913, translation by Robbins and Jelliffe). Don Carlos and Byrons Parisina and Phædra are typical dramatic illustrations utilized by Rank for his elucidation of this displacement.

The struggle of father and son is taken up in a chapter of forty pages and is followed by a detailed analysis of this struggle as portrayed by Shakespeare and by Sophocles.

Ancient myths are next worked over; the castration symbolism thoroughly analyzed and its inherent connections to the incest problem pointed out.

Then follow the father-daughter situations as portrayed in myth, fairy tale, sagas, poetry, real life and the neuroses—an extremely sug-

gestive and important chapter to one whose attitude towards the psyche is not one of naive simplicity.

These chapters, making up 400 pages of the work, deal solely with the relations of the children towards the parents. A second part of the work deals with the relations between the children themselves. Here sister and brother loves and hates are thoroughly gone into, particularly as shown in the great works of poetic creation, Grillparzer, Goethe, Byron, Schiller, Moses, the Greek tragedies of Sophocles, Æschylus, Euripides and many more modern writers down to Ibsen.

One cannot present within the limits of a book review the many illuminating suggestions that Rank has gathered and packed into this volume of some 700 pages. The form is perhaps too concentrated but the scholarship and wide reading are evidenced throughout in this highly instructive, stimulating and serious contribution to a knowledge of human mental activities.

JELLIFFE

OSIRIS AND THE EGYPTIAN RESURRECTION. By E. A. Wallis Budge, Keeper of the Egyptian and Assyrian Antiquities in the British Museum. G. P. Putnam's Sons, New York.

In two volumes of rare attractiveness and unusual interest Mr. Budge has given a very complete presentation of the religion of immortality in ancient Egypt as expressed in the worship of Osiris and Isis, a religion distinguished by its wide extent over all Egypt and its firm hold upon all classes through the changing dynasties of thousands of years.

The form of these volumes is worthy of note. Illustrations and original texts from the temples and tombs of the Egyptians are lavishly reproduced and at the same time so clearly arranged and explained that the uninitiated reader can follow them with interest even without the knowledge necessary to decipher the hieroglyphics or interpret the pictured scenes for himself. The translation of extensive passages from the texts carries us by its literalness straight to the heart of the convictions and beliefs expressed in the elaborate ceremonials and the funerary writings, while at the same time reproducing the majesty and beauty of these texts it reveals the upward striving which lifts the religion above the gross and base which some of the details would seem to express to the philistine of modern times.

If this faith were to be understood as imposed upon the Egyptians from without it would be more difficult to understand its content as well as to explain the dominance it had over all Egypt. But the author devotes a large portion of the book, and by no means the least



interesting, to a comprehensive, comparative study of religious beliefs and customs prevailing even until to-day among the tribes of Africa, particularly of the Sûdan, proving his claim that the Egyptians, sprung from the same stock as their southern neighbors, have developed this religion from the same germs and beginnings which are still found there in less developed forms. Understanding it then as an indigenous faith, altered and enlarged with the growth of the nation itself, it takes on a deeper psychological significance and offers rich material for the better understanding of the inner content of human life as it is coming to be known by the penetrating psycho-analytic study of the myths and religions of many lands or of the unconscious activity of individual minds particularly as revealed in dreams and in the psychoses.

The origin of the Osiris legend is veiled in uncertainty. Most likely Osiris was a beneficent king who gradually became deified and besides the virtues and beneficent acts belonging to his reign, as time went on he absorbed to himself the powers and attributes of all the other gods which the Egyptians worshipped and revered, even those imposed upon them later by foreign influence. It is thus an outgrowth of ancestor worship and the fact of this indigenous origin and growth explains the wide and tenacious hold it had upon Egyptian thought and belief. It is probable that that part of the Osiris legend describing his death and dismemberment reproduced the actual facts of the death of this good king. As the facts are incorporated in the legend they are stated in various forms but always with the same general theme. Osiris is overcome by his wicked brother Set, who kills and dismembers him, scattering his members far and wide. Thereupon Isis, his sister and faithful wife, with loud lamentations, makes diligent search for the lost members, which with the help of her sister Nephthys she again joins together. Then by exercising her magical powers she effects union with her dead husband that she may conceive and bear him a son, the great Horus, who by the ceremony of "the opening of the mouth" and by giving to him his Eye which contained his soul or life, restored life to the dead Osiris, who thus came to live forever.

This legend as it develops into an elaborate religious faith and cult is an embodiment of the fundamental human desire and cry for immortality, the life-power sought by Isis for the procreation of the son for Osiris and herself, who should avenge his father and give the dead father life again through the son, that Osiris should become the risen god, the prototype and forerunner of his devoted followers who should attain life after death through him and obtain besides prosperity, fruitfulness and life power in this world from the god

Osiris and his no less honored wife. Gross and materialistic was the conception of the Egyptians of the future world and of the life lived there, yet the faith embodied in this oft-repeated legend is a wonderful revelation and expression of the great fundamental instinct and desire. It is not strange then that this cult spread over all Egypt until Osiris was identified with local gods of every part and with those held in highest honor and reverence, nor that in time the religion of Osiris and Isis should have spread far over the ancient world beyond Egypt.<sup>1</sup>

In the various presentations of the legend and in the descriptions of the ceremonials of worship, the funerary ceremonies and the like the volumes abound in details of ceremony and of belief which, even as does the main story itself, reveal in striking manner the workings of the human psyche in its earlier attempts at the sublimation of the sexual instinct, the craving for immortality and its attempted though unconscious expression. There is a rich symbolism which helps in the understanding of the phantasies and of the ceremonials of those who are mentally sick, as well as of the content of the dream. The Eye of Horus is plainly accepted as the symbol of the life power. The breathing of magic words into the mouth conveys the same life element. Plainly sexual in its significance is the myth of Isis and the sun-god Rā when she used her magic arts to obtain from him his secret name which contained his power. Catching some of his spittle she mixed it with earth and produced a deadly serpent which stung him. Then in his agony and extremity he revealed his name to her that he might obtain from her the healing which her magic could give. Spitting was plainly a common religious act as well as a distinctly creative act, nor were serpents without special significance. Again when in the mysteries connected with the burial ceremonies of Osiris we read that for seven days the figure of Osiris was laid in the branches of sycamore trees to signify the seven months he passed in the womb of his mother Nut we have a most interesting illustration of the symbolism employed by the unconscious in the dreams of birth or in still more sublimated form in the architectural form of churches and cathedrals. Not the least important is the honor given to the symbols for Osiris and Isis which came even to be regarded as fetishes and which the author thinks undoubtedly were originally representations of the *os sacrum* of Osiris and the uterus and vagina of Isis, the parts of the body most closely associated with procreation and the giving of life. Instances of the rich symbolism might be multiplied but these serve to show the value and interest the book

<sup>1</sup> See Rank: *Myth of the Birth of the Hero*. Tr. by Robbins and Jelliffe. *Nervous and Mental Disease Monograph Series No. 18*.

possesses to the serious student of mental phenomena as it gives us the religion in all its setting of history and ceremonial with the many details which amplify and confirm the true meaning and significance of the faith.

L. BRINK (New York).

**THE UNCONSCIOUS:** The Fundamentals of Human Personality, Normal and Abnormal. By Morton Prince, M.D., L.L.D. New York, The Macmillan Co. 1914. Pp. 549. Price, \$2.00.

All who are familiar with Dr. Prince's work in the realm of psychopathology will welcome this book. It is a concise, consecutive, and well written setting forth of the principles for which he has so long stood and which he has spent so many years in carefully elaborating. The book is done in quite his best style.

Dr. Prince's conception of the unconscious is quite different from that of the Freudians. Many of the elements which he considers in this book and which he calls sub-conscious, or co-conscious, the Freudians would call fore-conscious, while certain sets of the personality in the way of types of disposition, which he refers to as distinctly neural processes, the Freudians would see as having certain attributes of a distinctly psychic character, aside from their purely neural character. In fact a considerable portion of the book is taken up with the consideration of fore-conscious phenomena.

Another fundamental difference between Dr. Prince's point of view and the trend of recent psychoanalytic work consists in that he is all the time considering the individual as if the individual were a definite well-defined entity and not an organic part of a larger whole, —the race. In other words, the genetic concept is not at all elaborated in this work, and to that extent it has a certain rigidity which comes of considering the individual as a clear-cut entity.

There are indications in the book that it may be followed by another, in other words, that it is only the general part of a special exposition which is to follow and which will deal specifically with the problems of every-day life and of special pathology. The present work, then, might be considered as laying down the principles upon which the subsequent work is to be founded. The principles represent what, in essence, Dr. Prince believes to be desirable matter for incorporation in a course in psychology in the medical school, and no matter how much we might differ from him in our belief as to just exactly what was best to teach, I think every one would be overjoyed if such a work as this might become a text-book in the medical colleges.



Dr. Prince is to be congratulated upon this volume as an altogether admirable presentation of his position, and even those of us who are of distinctly Freudian tendencies can find much of value and much to learn in these pages which come from a mind rich in the materials of experience.

WHITE

UEBER HALLUZINOSEN DER SYPHILITIKER. Von Privatdozen Dr. Felix Plaut. Verlag Julius Springer, Berlin. Pages 116. 5.60 Marks.

Mental manifestations accompanying syphilis of the nervous system are not at all pathognomonic, and, indeed, in making the proper diagnosis the somatic background is of great importance. With the aid of the Wassermann reaction and cytological examination our knowledge of the mental pictures in cerebral syphilis has become enriched. Plaut's latest monograph is an excellent contribution to the literature of these disorders. In it he discusses hallucinations in paresis, tabes, and suspicious syphilitic hallucinations in senescence and recognizing two specific types of syphilitic hallucinations: the acute and the chronic.

In the acute form the clinical picture is characterized by anxiety-excitement which develops acutely or sub-acutely. Although the sensorium is usually clear; slight disturbances in time orientation, subjective feeling of unreality, and perplexity may be occasionally observed. As a rule delusions of persecution were present in all of his cases. In addition depressive ideas of self-reproach were noted. Active auditory hallucinations were manifest. Optic hallucinations in the sense of visual fancy was seen in one instance; in another case olfactory false perceptions were in evidence; and in another one the patient reacted to haptic hallucinations, experiencing electric sensations in the body. Hallucinations usually occurred at the height of the excitement. The underlying mood was one of anxiety which was labile and easily influenced by suggestion. Psychomotor unrest was not very marked except in one case, in which it could be easily controlled. It is interesting to note that the patients exhibited good insight into their condition. Duration of the illness varied between eighteen days and ten months. Recovery was complete and without any appreciable intellectual defect. The Wassermann reaction was positive in all cases and the cerebro-spinal fluid showed some pathological alterations except in one instance. Somatic manifestations of a neurologic background were demonstrated in all cases but one.

In the chronic type of the hallucinatory state the development of the disorder may be sudden. The disease picture is characterized by excitement and active and persistent auditory hallucinations which are usually of a depressive nature. In some cases haptic and taste false perceptions were observed. Delusions of persecution and in two instances grandiose ideas were demonstrated. Consciousness of one's personality was not projected in delusional formation, except in a deaf patient hypochondriacal ideas were observed. Sensorium was clear and even in marked excitement attention and orientation were not essentially affected. Anxiety was very marked especially in the hallucinatory periods. At such time the patient showed suicidal inclinations and aggressiveness. There were no evidences of intellectual deterioration except in one patient who was deaf and mentally defective prior to the onset of the disease. Striking katatonic manifestations were not observed. In all these cases the Wassermann reaction was present in the blood and in two instances the fluid was free from abnormal constituents. From the somatic standpoint the patient showed evidences of some neurologic disorder. In two cases syphilis of the skin was recorded and in another case the patient had congenital lues.

While it must be frankly admitted that Plaut's monograph is of considerable psychiatric value, nevertheless the reviewer feels that in the present stage of our knoweldge of psychopathology we are not in a position to speak of specific type reactions of syphilitic hallucinatory states. Some of the cases reported under the chronic form of hallucinations are not at all clear and the question of a schizophrenic reaction cannot be so easily excluded, particular reference is made to the two cases which presented no abnormal constituents of the cerebrospinal fluid. It must be borne in mind that the symptomatology of the acute form strongly simulates an hallucinatory state of a toxic genesis, and the question of a mixed condition, alcohol and lues, should be thought of.

KARPAS

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# THE PSYCHOANALYTIC REVIEW

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## ORIGINAL ARTICLES

### COMPULSION NEUROSIS AND PRIMITIVE CULTURE

AN ANALYSIS, A BOOK REVIEW AND AN AUTOBIOGRAPHY.

BY SMITH ELY JELLIFFE AND ZENIA X—

In April, 1913, Zenia X—, came to consult me. She was incapacitated for any form of continuous work or pleasure. She had erected a complicated series of ceremonials, which compulsive activities occupied her whole waking time and made the living of life unendurable. Far above the average in physical, mental and moral endowments, her life, up to her thirty-fifth year, had been practically futile because of her psychoneurosis. She despaired of ever finding any relief and welcomed the idea of self destruction.

She was the elder of two girls, and had a brother two years older, another two years younger, and her sister was four years younger than herself. The parents were second cousins. There were no ascertainable neuropathic factors on the father's side. A maternal grandmother had asthma, her sister had compulsive ideas and died psychotic in the presenium. The mother died of a cerebral thrombosis (hemorrhage?) at the age of fifty-four. Three children of a maternal uncle died of tuberculosis.

The prominent complaint at the time when first seen was an uncontrollable femoral tic, spreading to the vagina, perineum and anus. This had been present several years. Coupled with this, or independent of it, and even more persistent, were com-



pulsive prayers, asking for cleansing, for purity, and which were usually repeated in multiples of two until a cycle of eight prayers were gone over, when the cycle would be renewed. Some days thousands of prayers would be uttered to aid in the relief of the tics. Other compulsive acts will appear later.

The present paper will not attempt to more than outline the analysis of the case which has been in progress, uninterruptedly, for some eight to nine months, after which time the patient was able to take up some of her former work. The analysis is far from complete, however, and is now again under way.

It was while working in the analysis with some of the patient's urinary and fecal phantasies that I asked her to go more deeply into the situation, and we then took up the study of Frazer's recently published work on "The Belief in Immortality," as well as some of his volumes in the "Golden Bough."

The motive is clear. In these memorable studies, monuments of anthropological research on the origins of religious beliefs and customs, are to be found the most complete setting forth of the animistic beliefs of primitive peoples. If the child of the twentieth century is a résumé of what has gone before, he too passes through an animistic stage. Although highly compressed, yet nevertheless, his notions of the universe at certain stages of his evolution will correspond to those of more primitive races.

It was here then that we turned for a better comprehension of the infantile phantasies which were the causes of the complicated ceremonials constituting the psychoneurosis, with the following results:

In his Gifford lectures<sup>1</sup> of 1911-1912 before St. Andrew's, Edinburgh, which appear in his recent volume entitled "The Belief in Immortality and the Worship of the Dead," Dr. J. G. Frazer sets forth the beliefs concerning the souls of the dead and the resultant customs regarding death and burial, all suggesting the beginnings of a religious belief and worship. This volume is occupied with the beliefs and customs as found in the lowest existent races of to-day, the aborigines of Australia, and in tribes showing a gradual advance toward culture, the races of the Torres Straits Islands, New Guinea and Melanesia. As

<sup>1</sup> Offered for publication, October, 1913, by Zenia X—.

these beliefs and practices enter extensively into their lives a study of them is of necessity a detailed study of their mental or psychical life and a survey of a large portion of their activities.

I have found in this collection so many illuminating points of contact regarding my own phantasies, which I have come to believe lie at the basis of my illness, which physicians have termed a compulsion neurosis, that I have thought it would be a profitable task to examine them closely in order to understand them in the light of my own experience and at the same time better to understand my own condition. If I seem at times to find an interpretation deeper than that which the average reader would see in them or an explanation farther reaching than that the author of the book himself gives, I have only to look into my own experiences to find there the interpretation and explanation that I am bound to make, at the same time that I receive an illumination and a clarifying of the things that in the past have puzzled and terrified me. That I should find here parallels between my psychical experiences and those far away primitive people once more confirms the hypothesis that the life history of the individual repeats the life history of the race, and from this arises the value of a review of the beliefs and customs of peoples in that stage of development that corresponds generally with the period of infancy and early childhood in our more cultured races, when these things began with me and stamped their impress upon my psychical life. These experiences may be familiar enough in the literature of psychoanalysis. *Such literature having been kept from me I have read nothing of it* and can, therefore, only examine my own phantasies in the light of the parallels I find among these people.

Among the earliest recollections of infancy and childhood, which have formed part of the chaotic content of my mental life, are those connected with fecal phantasies, which with the re-animation of all infant experiences, with which my illness has busied itself, have continued in dreams and waking thoughts of adult years. Even stronger in childhood and continuing with more tenacious grip upon me in adult life are the urinary fancies closely associated with the fecal, but revealing more distinctly the association that links the acts of defecation and urination and

the phantasies concerning them with reproduction and the childish phantasies that play about it.

Distinctly fecal are a few outstanding incidents occurring during the period from the age of three or four until nine, ten or eleven years. Earliest is the memory of standing with my brother a year older than myself in an outhouse playing that we were the Trinity "creating" a baby of dust and dropping it down to earth, presumably, though my memory fails me at this point, to the feces below. My earliest remembered idea of the birth of a baby was that in some unexplained way a God with supernatural power reached down and fashioned with his hands a baby from the dust, dropping it then in some manner to earth. Just how the little play arose at this time with us, why the idea should have come into our heads to play the game in the outhouse I do not know. It surely seems to connect itself with fecal fancies so prominent in the infantile mind and our study of the savages, as we shall see, serves to establish this idea.

A little older, with my brothers, I climbed a high tree that our defecation might fall over the branches to the ground below. In this act, beside the childish exhibiting of ourselves, there was I think a sense of something forbidden and tabooed as well as a sense of mysterious pleasure. Here at once begins the association with the stronger urinary fancies. There was always a strange feeling of exhilaration and mysterious union with mother earth if in our play or on some picnic or excursion far from home we resorted to the soil for defecation or urination. Even in adult life on one occasion about twelve years ago, just before the final, conscious outbreak of my neurosis, I was alone in a wild and beautiful region away from human habitation and was compelled to resort to urination upon the earth. The same secret, pleasurable sensation was so marked, so vivid, that I feared to repeat the act, to put myself again in the way of this experience, and when only a year and a half ago it was once more necessary in a lonely spot, there at once arose the struggle with sexual thoughts and feelings to which for many years my illness has driven me. Even the visiting of outhouses as a child—this was in the country years ago—if they were strange to me or picturesquely situated, stirred in me such sensations and there was the same mysterious feeling in the all too busy childish fantasies



about the urination or perhaps the defecation of some imaginary person, an ideal lover it might be or some real person toward whom my affection went out in extravagant fashion. At the age of nine or thereabouts, in play with a cousin, I let my imagination run riot concerning a makebelieve husband of one of ourselves, or rather, I think, of an equally imaginary wife, or perhaps it was even a lover with his sweetheart, whose buttocks were seriously injured so that before and after defecation they had to be unbandaged and then bandaged again by the woman, with exposure particularly of the buttocks and anal region, as I remember it, and with great interest in these parts attributed in imagination to her but actual in ourselves. I could not define the feeling accompanying these experiences; it was a mystery, a pleasure secreted in my own body, strange, exhilarating, seeming to draw on the secret springs of my being, and even as in adult life the recalling of these sensations as well as the adult experiences described associate themselves with the feelings which my knowledge and experience have taught me are sexual, I think that I can interpret the childish sensations as part of the great underlying, sexual power in every life. Indeed even back in the childhood days this sense of mystery and forbidden pleasure linked these fancies even before definite sexual knowledge with the great but forbidden mystery that haunts childhood, the mystery of sexuality especially in reproduction.

A striking illustration of this presents itself to my memory as I recall my pleasure in a little song or poem familiar to my early childhood, probably at six or seven years of age. It was the story of a little flower parched and thirsty for the wet rain, then at its coming revived and happy, able once more to hold up her head with joy. Innocent enough this little song, but in me it always stirred the same mysterious, half pleasurable, half longing sensations which were associated with urinary fancies and which in my dawning consciousness were beginning to be connected with sexuality. The gushing of water in a jet or spray, especially from a long garden hose, has always been highly suggestive to me, recalling the act of urination as witnessed in childhood in my brothers or even in other boys, and suggesting in phantasy as I grew older the same act in men, closely associated with the idea of procreation.

Now what light do we obtain upon these early experiences of mine and the later ones growing out of them if we turn to the savage world? I find there first very real fancies full of the sense of the close association of the feces with the mysterious life principle or spiritual essence, that fundamental productive life which finds its concrete expression in the sexual power, which permeates all their body and, therefore, every product of that body also. For them the feces contain the vital principle. Touch the feces and you touch the life and health of the savage himself. He wastes away if his excrement is burned, is afflicted with disease and death if the sorcerer brings a bit of the fecal matter into contact with the ghost or works magic with it himself. It appeals to their interest and activities as it occupied my childish fantasy and play, so that they smear themselves with it in mourning, or using a slightly advanced symbolism, with clay or black earth in its place, showing the clinging here to the idea of the life principle within, which is made a propitiatory offering to the dead, and at the same time furnishing an illustration of infantile exhibitionism.

Urinary fancies which were so strong with me do not appear quite so distinctly in the account of these people. But I am led to interpret the symbolism in certain of their beliefs and customs in the light of my own experience from which I receive in turn further light upon the fancies that have so long disturbed me. With the infantile races as with me, I think urination and the mystery of reproduction particularly as represented in the procreative act, are closely associated. This is most plain in the myth of Sido, a hero of one of the tribes of New Guinea, who finding the land of the dead a barren region "by an act of generation" made it forever fertile and fruitful to those who should come after. In Central Australia rain is sent by a huge, mythical serpent, the belief in which monster is a faint fore-shadowing of a belief in a deity. In more advanced tribes rain can be produced by pouring water over a skeleton suspended over taro leaves or by pouring it over a ghost-post which represents the figure of the dead. My phantasies constantly reanimated in my illness make the notions herein contained vivid for me. The serpent sending rain is sending it in some mysterious way from

his own body, the water poured over the skelton or over the post substituted for it obtains some life power from the contact, at least by means of homeopathic magic, that life power which later we shall find lies in the bones of the deceased as well as in any other residue of his body, and so becomes the fruitful rain.

If the rain-maker, the mediator who obtains the rain from the ghost, wishes to prevent its falling for reasons of his own, by this same principle of imitative magic he refrains from washing his face or from any work that would cause him to perspire, lest the trickling water over his own body should cause the rain to fall, indicating that in truth the source of it lies in the moisture or fluid from the body of the ghost, which by imitation would be called forth. Further significant is a belief of the Kai tribe of German New Guinea. When rain is wanted the people pray to two ghosts to drive away a female ghost who is holding back the rain, suggesting it seems to me that behind this practice lies the fancy that this woman ghost would jealously stand in the place of the waiting, thirsty earth. In this as in all these instances we can see that the rain comes from the ghost charged with the power of life and fertility, and the mysterious association always so strong in my psychical experience becomes clearer as these practices and beliefs reveal the same fancies linking the reproductive power with urination and with the various excretory products of the body.

Illustrative of my vivid sensations in regard to defecation or urination, especially upon the soil, I note the mention of the custom among certain Melanesian tribes, a custom probably widely prevalent among all these tribes, of resorting to the depths of the forest, the graveyard or the sea to deposit their excrement in order that no bit of bodily waste may be available for the wiles of the sorcerer or the ghost. There is an apparent contradiction here in the mention of the graveyard, but as it is only the newly deceased whose ghost prowls about as a rule and presumably those whose bodies have been finally laid away in their graves have ceased to haunt and molest the living, the graveyard like the forest and the sea can serve as an effectually remote spot. While, however, this custom refers to the already mentioned, definite use by the malignant, sorcerer or ghost of this waste matter, it also touches directly upon my experiences. Is it not true



that the mysterious association of life power, the reproductive principle with its manifestation in sexuality, which was present in these acts with me was an unconscious element in the psychical content of these peoples, with whom resort to the soil or water for performing these necessary bodily functions was the only method available? So that my experience is again but a natural phase in the individual and racial development, while at the same time both in me and in these peoples the nearness to the soil and the sense of union with it would both excite and foster this idea of life within the excretions, their partaking of the spiritual essence that pervades all the body and the fruitful earth as well.

We find thus in the savage mind the same ideas and fancies which have filled my life. It is plain in the telling of my own story that they existed also in the psychical life of other children with whom I played, but these children grew and forgot them, were able to leave them to the accumulation of experience that makes up our unconscious life. With, me, because of the illness that has bound me all my life, they were magnified even in childhood, both the fascination of them and at the same time an accompanying sense of guilt, and never dismissed from conscious memory they early attached to themselves a distinctly sexual character. Even at the age of seven the unrecognized sexual association of earlier years was beginning to take form, due in part to a gradual knowledge of sexuality in the life of barnyard animals, and manifesting itself as I have already shown in a partially recognized manner though yet not clearly defined. A closer realization of it came, however, at the age of ten when the fact of sexual intercourse as the source of human birth was crudely brought to my knowledge. From this time the birth of babies with at least a covert reference to the sexual act was a subject of revery and of secret conversations with a playmate; until at the age of twelve and thirteen a sense of guilt with a new feeling of disgust added to the burden I already felt this forbidden knowledge to be, and I turned completely from such secret conversation. Now, however, under the guise of "impure thoughts" and a struggle against them the sexuality manifested itself with distressing insistence as again at the age of sixteen. Between these ages and after that of sixteen the thoughts for awhile abated their violence and my mind dissipated itself more quietly

in reverie, extravagant love phantasying and the like, the childish experiences always in memory, until at the age of twenty-five the whole psychical ferment broke out in overwhelming sexual thoughts, and I was beaten helplessly between these thoughts and an ineffectual ceremonial disguised as a warfare with them. There was never any cessation of the psychical experiences only a difference at different times in the form and intensity of their manifestation, in later years their violence at times almost sweeping me from my place in the world of reality. After this brief outline of my illness one can see what value there is for me at least in a comparative study of other fancies and ideas like mine, which now I recognize as belonging to a period in the development both of the individual and the race, but which the neurosis had so clothed with undue value that when I might have outgrown and forgotten them they were kept in memory, and then with added intensity and sexual meaning thrust violently into consciousness always as peculiar to myself and intrinsically evil.

Continuing then the comparison of my phantasies and experiences with those in primitive races, other most troublesome ones in my life will be set in their proper places and stripped of their ever exaggerated importance as exclusively mine. Very insistent during the years since the great final outbreak has been the idea that sexuality, therefore impurity, had crept in to separate me from my duties, especially those of a religious nature, an idea found in the savage mind as a frank conception of the spiritual essence actually touching external objects through contact with the secretions of all kinds. This idea was present with me probably even in childhood. I was much given then to washing and cleansing my hands, was very fastidious in my aversion to a drinking vessel or a food utensil that another had used, or to a common towel,—perhaps there was already an unconscious recognition of the pollution which my phantasy has since so strongly associated with sexuality. But it is in later years that this has been distressingly realized. While my thoughts were always considered unclean, there was also a constant fear that I would offend God by outward uncleanness if any particle of secretion from my body came between me and prayer or other religious exercises or was present when I spoke God's name. It might be that tears or other secretion about my face had been due to sexual thoughts

or otherwise connected with them, or in bathing perhaps my lips, which were to utter the prayer, or my hands and face, which were to be most before God in the attitude of prayer, were polluted by a bit of secretion carried by water or some part of the towel that might have come in contact with the genital region. Hence countless hours have been spent in bathing and cleansing, in repeated attempts to have the body clean from its own pollution. Not alone must hands, face and lips be cleansed from any possible soil, the genitals themselves must be carefully bathed again and again. Unpolluted surroundings must be found before a prayer, for inner cleansing usually, perhaps for some other need, could be said or God's name uttered. A kneeling place must be sought where if possible there was no pollution. If at the bed it must be a position where there was no direct contact with a part of the sheet that might have become soiled, even often the covers must be removed and the mattress turned that no trace of fecal or other odor might be lingering at the place of prayer. Particularly difficult it was to kneel at a bed in which I was about to sleep or had just slept which I knew had at some time been occupied by a married pair. Chairs were no better kneeling places because they were possibly polluted by those who had sat upon them, or by clothing laid upon them over night to which secretions or odors adhered; and again the clothing itself must be as fresh and clean as possible. There was an idea of actual existing secretion unclean before a holy God, and with this the associated sexual thoughts seemed to come as objective things between myself and Him and with these thoughts certain compulsive movements also in various parts of my body which though apparently used to divert my mind from the thoughts, really served to keep them before me and to increase them; between all of which thoughts and activities it was difficult clearly to distinguish. The fear; all this preparation for prayer and then the endlessly repeated prayers for cleansing all served this purpose, to keep alive and to multiply the sexual thoughts and feelings against which I seemed to be fighting. So that in very fact the whole ceremonial was a cunning device of my illness to perpetuate the sensations and phantasies upon which it was feeding. Religion had disguised all this under a fear or sense of sinful impurity before a Being white and pure, but the



disguise slips away revealing a different explanation when one finds in the beliefs and ceremonials of those savages both a parallel animism magnifying a bit of secretion and making it a factor in what religious life is theirs, and also a resort to the ceremonials that serve as with me a twofold purpose.

With them not only the feces and urine but all the excretions of the body take on a mysterious power to be both sought and feared. To the savage mind any bit of excretion contains a bit of the mysterious soul-stuff, the means of contact with the dead, the substance of greatest worth to the living. It is of such vital character that in it as already stated the sorcerer finds the means of afflicting his victim with utmost evil, or it may be of loosing him from an already evil-wrought spell; with it he connects him with the ghost who will directly work him harm. He has only to extract a bit of this soul-stuff even from the moisture of the breath, from the spittle adhering to a particle of discarded food, and the power is in the sorcerer's hands. The tears of the ghost, it is noted, contain the life which may work harm. Or to share with the dreaded ghosts this life principle, in order to propitiate them, the most severe self injuries are inflicted that the blood of the living may drip abundantly upon the grave and the corpse itself. Then with apparent contradiction this life principle is taken from the dead by the living as they receive the juices of the slowly decaying body, either smearing themselves with them or in the case of the widow in certain tribes even drinking the revolting substance. Whether in the living or still lingering for a time in the dead this spiritual essence, the mysterious life power, permeates all the body and every product of it. In my case I interpreted this as something evil and unclean because grounded in sexuality; with them there is a recognition, animistic though it be, of this as but a natural manifestation of the immortal, reproductive principle underlying all our life.

Because of their simpler, more childlike conception they more frankly as it were and naturally use their rites and ceremonials to keep before them the fundamental sexuality and reproductive power, which this life principle represents, in symbolic form and in certain rites even in direct, unbounded license that they may enjoy it to the full. In fact all of their ceremonial is full of such meaning, the offering of their own blood to the dead and

the incorporating of the juices of the dead body into themselves, which we have just now mentioned; the many rites in which food is offered to the dead, fruits, taro, yams, the blood and flesh of the pig, where the living eat of the food, a part or all of it, when the ghost has appropriated the soul of the offering; and that most interesting and symbolic ceremony observed in many tribes, the initiation of the young men into full manhood. The candidates for initiation being circumcised disappear into the belly of a huge monster, in reality a hut built to represent a monster, who keeps them for a period of digestion and then releases them safe and sound, receiving in their stead an offering of roast pig, of which again the people may partake, as the monster requires the soul only of the offering. This is a most solemn ceremonial and full of symbolic reference to the life power and its sexual manifestation, the whole act of procreation and birth being here enacted, from which the young men come forth at the end reborn into a new life. When this protracted ceremonial is thus far completed there follows a period of the most unrestrained license, which still is a sacred rite by which these people indeed manifest that twofold significance of the ceremonial, its symbolic or religious purpose and its use as an occasion for the full enjoyment and possession of this idea of the all pervading sexual power.

There is another field in which my sick fancy has busied itself extensively with a form of phantasy not unconnected with the subjects already discussed, a field in which the primitive mind, too, evidently finds a wealth of symbolism. Throughout the many years of my illness I have been troubled and distressed because I was conscious of finding in objects of nature and representations of them in almost everything about me some form suggestive of the organs of generation in particularly the phallic organ. As early as at the age of seven or eight a playmate showed my brother and me how to represent the female organ by folding up the skin on the hand or arm. After that at school I frequently saw pictures drawn by children with pencil or chalk or made with the fingers suggestive of the contact of the organs male and female. It seems to me that very soon I had begun to imagine in natural objects and in signs and pictures about me these same suggestive representations, but they did not yet seem to call for repression,

even though already they brought me a sense of guilt in the possession and secret enjoyment of such knowledge and such thoughts. At the age of thirteen or fourteen, when I had forsaken these earlier activities but when impure thoughts were creating a severe struggle in me, this symbolism was a part of the content of the disturbing thoughts. I remember most distinctly how at this time in my study of geography Lake Michigan projecting below the other lakes on the map was strong in its suggestion. In fact it seemed to be the whole group of the Great Lakes which brought me so forcible an idea of sexuality, though not clearly and fully recognized then, that I could scarcely use my map and look upon this part of it. It was not only the shape, perhaps, of the lakes but some vague feeling also about the body of water, it may be because of its position in the center of the land. Other marked contours of land and water seem to have suggested the same thing in a lesser degree, while perhaps from this time on, though more fully in later years since the struggle has been more consciously sexual and thus more violent, I have been surrounded by symbols, particularly of the phallus. I have already mentioned the significance of a garden hose in use or of another jet of water. Pears particularly, or other elongated fruits as well, long, pendant catkins, the pistil in the center of the flower, a stick or stick-shaped object thrust into a round hole, the lobe of the ear with which I have toyed since birth, my teeth, and my tongue which I have nervously pressed against them until weary, a finger which seemingly in order to suppress a sudden sexual thought I have many times pointed before me and then in quick correction have drawn in and folded within the others, the thumb which again involuntarily in a repressive effort is folded close within the fingers, certain letters of the alphabet; these are some of the symbols which have beset me on every hand, thrusting themselves continually before me to remind me of the phallus or of the actual contact of the organs male and female, these symbols like the ceremonials serving to keep before me the forbidden thoughts and feelings even while goading me to vain struggle against them. There were some objects that suggested the female organ only, the starfish with its rays, for example, though even here a suggestion of the phallic meaning appeared if I regarded the separate points or rays. So vivid has been



the suggestion of these symbols, so overcharged with meaning and feeling for me that I have been driven constantly in the past to roundabout ways of speech and action in order to avoid sight or mention of them or other reference to them.

The comparison of this form of phantasy in my illness with the fancies of the peoples we are considering will reveal a richer symbolism even than mine and again will shown that I have been dwelling on a plane that represents the level of the infantile and the primitive mind. There is first a type of myth concerning the origin of death called by our author the Banana type, prevalent among other primitive races beside these we are studying. In these myths the banana is given as the symbol of a life that bearing fruit must itself become mortal and pass away. Taro, yams and coco-nuts are constantly used to signify or to produce fertility. They are offerings of food for the dead, bananas, yams and germinating coco-nuts are partaken of by friends and relatives of the deceased at mourning feasts, or with that opposite tendency, which is in reality another manifestation of the same underlying principle, are distinctly tabooed all of which points to the life supposed to reside in these articles of food, the shape of which would give them a concretely symbolic significance. It is difficult here as in all these highly symbolic customs to separate one class of experiences from another. It is true in my own experience, it is plainly so in these beliefs and customs of our study, that bound as they all are by the fundamental principle underneath their meanings merge one into another. Thus the foods serve to supply through the nutritive element the same life which in its reproductive character is represented by the phallic and yonic symbolism. The germinating coco-nut seems to have a special significance which my own phantasy makes it easy to interpret. This fruit seems peculiarly to represent the female. Among certain of the Melanesians the widow of the deceased must remain, so long as the ghost is still prowling about, upon her husband's bed, where if he returns to his house he would expect to find her. If, however, she must leave for a few minutes a germinating coco-nut shall be left in her place upon the bed. The Tami tribe of New Guinea have a protracted dance ceremony lasting about a year in honor of certain spirits in whom they believe. During this whole dancing

period coco-nuts as a food are strictly forbidden. In a number of tribes it is noted especially that with the destruction of other property of the deceased his coco-nut trees must be cut down. These examples show that the coco-nut is for them a female symbol of the reproductive power, substituted in the one place for the wife, in the other instances destroyed and tabooed as the life and power of the deceased ebbs away, or probably tabooed in the case of the Tami tribe because the spirits worshipped by this dance are very old and, therefore, unproductive. The other fruits we have mentioned together with sugar-cane and with the bamboo, in which latter with one of the tribes of New Guinea rice for the mourners must be cooked, these are all used in feasts and offerings for the dead and in ceremonies for obtaining blessings for the living, symbolic through their form of the life they are supposed to contain and impart. In this same tribe of New Guinea after a death long sago-cakes are made by the mourning relatives and sent throughout the village while a month later, perhaps because then the life of the ghost is fast fading away, round cakes are made and distributed. The New Caledonians believe in a very fertile land of the dead as far as the land itself is concerned for there grow yams, taros, sugar-cane and bananas in abundance, but it would seem that the poor ghosts gradually lost their vitality and life power if we judge of their playthings. These consist of wild oranges which they roll about in sport, those newly arrived playing with oranges that are green, those who have been here a little longer with ripe ones and those longest in this spirit world with only dry and withered fruit.

This myth comes with startling reference to my troublesome phantasy. Back in those childhood days I learned from other children the terms "thing" and "plaything" to designate the genital organs and particularly the term "ball" or "balls" for the testicles, and these terms have been so real a part of my disturbing memories and fancies that for many years I have had to avoid these words "thing," "plaything" and "ball" in ordinary speech, or if I used them it has been with a conscious effort because of the association to be repressed. Even an orange either from my own phantasy or from having heard that, too, possibly referred to in this way seems from its shape to be a

ball and so a picture of the same organ as the ball itself. Since this has been so long a part of my phantasy, no less vivid because only one small part, I come upon this savage fancy with a special interest and find in it one more helpful instance from their lives to lessen the overvaluation of my phantasy and put it where it belongs. So with them on every hand for the dead or for the living fruits and vegetables play a large part in symbolizing the life power and its concrete expression in forms both male and female.

Not alone in the fruits, which would at least contain the idea of the life power in nutritive form, but in other objects do these people like me see a distinct phallic meaning. They preserve the bones of the dead, the skull, the long bones of the arm and the leg and the ribs, which are worn by the living as if life and strength could be derived from them; they are hung up with taros and yams and further new life is put into the bones by dipping them into the blood of newly slaughtered pigs or by touching them with other bones so treated. The jawbone of a deceased husband is worn by his widow; in one tribe of the Admiralty Islands the teeth serve as a necklace for the sister of the dead man. In other tribes the relatives wear a tooth or teeth of the departed, the hair, plainly associated with sexuality, is often worn with the teeth, it may be by sons and daughters or by a mother for her dead child, and boars' and dogs' teeth are "precious objects" used as offerings to the dead. The teeth of an old woman are planted in a yam field to insure the crops. The nose, too, is a symbol. It must be pierced in life or the ghost may not enter the spirit land of bliss but must abide in a place of scarcity and want, or in another tribe the ghost must go about with a worm-like creature hanging from his nostrils. The nose is a life symbol that has no place in the world of the dead. For the same reason, too, the lobes of the ears of mourners must be cut as a sign that productivity, the procreative power, is gone from the departed one. In the Torres Straits Islands they are the lobes of the ears of youths recently arrived at initiation and of maidens at puberty that are cut in mourning, the blood from which drips at the feet of the corpse, while of other relatives the hair is cut and offered, all to restore to the dead in propitiation some portion of the life cut off in him, restored symbolically or it may be also with imitative



magic through these representative forms. In one instance we note that the ears of the dead must be pierced or the ghost cannot drink water while unless he has received tattoo marks, marks sexually symbolic no doubt, he may not eat good food. He is denied the privileges of the ghostly world if not properly marked as one belonging there because no longer sharing in the life on the earth. Such being the prominence given the ear in the symbolism of the savage the experience with mine is no longer unique nor is it difficult to understand why the constant toying with it had come to be part of the sin and uncleanness of sexuality which I had to bury in my ceremonial.

I have said that my fingers have been almost uncontrollably symbols of sexuality to me. Here again is a parallel in the use of the fingers among these remote peoples. Fingers are sacrificed symbolically as an offering to the dead signifying in this way, too, that their life is cut off; a mother sacrifices her fingers joint by joint as her children die one by one, seeming to say that thus little by little her immortality, symbolized in the suggestive form of the finger, is gradually being taken away. Among the Fijians little fingers were commonly used as a sacrifice to a dead chief, the fingers of boys and sometimes women, together with the foreskins of the young boys, which offerings were either placed in the grave or inserted in a split reed and put up in the chief's house. Foreskins were also used to procure the health of an important man if he had fallen ill. The use of these was attended by certain other practices which bear out the sexual interpretation found in this peculiar form of offering. In the first place the relatives of the dead chief must present the mutilated youths with young bread-fruit trees, which the friends of the boys must cultivate for them. Then when the offering was made in behalf of a sick chief the subject first chosen was the sick man's own son or nephew, who was solemnly dedicated as an atonement in the god's house, presents and promises accompanying. Meanwhile all but necessary foods were forbidden until the time of the feast. Particularly is it noted that no coco-nuts should be taken from the trees which seems to confirm the idea that this fruit has indeed a special symbolic significance. When the day of the circumcision arrived for the son or nephew, and other lads to be circumcised with him, there was feasting and with it a period of unbridled license such

as already found as a consummation of symbolic rites and ceremonies.

The wearing of a bracelet in mourning, of teeth formed into a necklace or of beads strung on a string, the depositing of an earring and a bracelet together that the corpse may use them for toll on entering the spirit land, these all seem to express the same symbolism that recurred to me so often in my phantasy,—that of the actual contact and union of the male and female organs. A special ceremony showing this is observed among the New Caledonians for increasing a failing crop of yams. A staff surrounded with branches represents a yam and is set up in a hedge of coco-nut leaves near the ancestral skulls, prayers being then offered. Before the completion of the ceremonies following there is a three days' taboo when no one may enter a yam field, a cemetery or touch sea-water. All this again points to the idea of the yam as distinctly phallic in its significance and the coco-nut as yonic, the power of which symbols may be frustrated if one disturbs the current of life coming to the field perhaps from the ancestors through the cemetery or the sea, for the spirit land of the New Caledonians is beneath the waters of the sea. Among certain magical operations with stones for various purposes there is one that strongly suggests a parallel to this phantasy of mine. In order to increase the burning power of the sun that a drought may be caused, a magician passes a burning brand in and out of a disc-shaped "sun-stone" with a hole in the center saying as he does it—"I kindle the sun in order that he may eat up the clouds and dry up our land, so that it shall no longer bear fruit." Though not the life of the earth, it is surely the life and power of the sun which are thus symbolically quickened and increased, a performance representative of the procreative and reproductive act.

There are also important ceremonies in which the phallic organ itself seems to impart a special power or virtue in a symbolic manner but without the intervention of another form as a symbol or representation. In the Warramunga tribe of Central Australia there is a strange, final ceremony after the flesh has entirely mouldered from the bones of the deceased, and when the soul is about to depart to its abiding spot until it shall be again incarnated. This final ceremony consists in taking an arm-bone, all the

other bones being crushed and buried, which is wrapped in paper bark, tied with a fur string and kept in this parcel for some length of time by a tribal mother. Then the important act of the ceremony is performed as described in the words of Dr. Frazer. "On that day a design emblematic of the totem of the deceased is drawn on the ground, and beside it a shallow trench is dug about a foot deep and fifteen feet long. Over this trench a number of men, elaborately decorated with down of various colors, stand straddle-legged, while a line of women, decorated with red and yellow ocre, crawl along the trench under the long bridge made by the straddling legs of the men. The last woman carries the arm-bone of the dead in its parcel, and as soon as she emerges from the trench, the bone is snatched from her by a kinsman of the deceased, who carries it to a man standing ready with an uplifted axe beside the totemic drawing." The remains of the arm-bone being now finally deposited, this is a signal that the soul has at last departed to its waiting place before mentioned. A performance of the same nature is described among the inhabitants of British New Guinea. It is part of an elaborate ceremony for the purification of a man-slayer, who though particularly the prey of the ghost of his victim is not considered morally impure but rather is held in honor among his own tribesmen. That part of the ceremony of special interest to us just here is this. After being rubbed upon his back with parts of a slain kangaroo the homicide stands straddle-legged in the water and washes himself. "All young, untried warriors then swim between his legs, which is supposed to impart his courage and strength to them." In the disturbing fancies that have haunted me for many years it has been not only the symbolic but the actual phallic form that has thrust itself before me in dreams by night or in waking phantasy by day. Once more then it gives me a better control of these phantasies, with a surer understanding of them, to find that the primitive races not only have these symbols, which may be more or less unconsciously used, but even in franker manner turn naturally to the real form itself in their life- and strength-seeking ceremonials. It is then not alone to my exaggerated phantasy that symbolic and actual pictures of the reproductive organs constantly present themselves. The primitive mind, too, sees on every hand emblems of that sexuality which is only the



most concrete expression of the life principle, the immortality to which the living cling and which, driven continually by a sense of fear, they seek through propitiatory offerings to share with the dead.

It is worthy of notice how much foods are used in their symbolism as well as directly in offerings to the dead and in continual feasting. There is more in this than simply the prominence that necessity would give to foods. My childish phantasy has busied itself excessively with the eating of good things, sweet cake, candies and the like. As a child I was always on the lookout for some goody to be offered me; I even dreamed, I remember, that I was left alone on the earth to enjoy unhindered the abundance of good things I might find. This desire for food has persisted all my life. I have repressed it for reasons of right and wrong. In some way it entered into my ceremonial; prayer must always precede the taking of food but that prayer could not be said without first the ceremonial prayer for purity repeated always with so much difficulty; perhaps I had made a sudden, even unwilling vow that I would take only a certain portion or even none at all of a desired food, perhaps in a slight degree a food might injure my body and so dishonor God. I have found reasons for much self-denial in this direction. These reasons were closely bound to my ceremonial but they were after all simply disguised forms of an unconscious repression of this inordinate, infantile desire; a repression not always, however, remaining in the unconscious, for I had with my other recognized reasons a sense of this too great fondness for food, which must be denied both because of the sin of self-indulgence and as a matter of personal pride. Moreover the correction of this infantile tendency extended itself to others causing me to look with disgust and scorn upon those who manifested a like tendency, and to deny myself rather than be like them. My taboos were almost as many as those of the peoples of the south seas and deprived me often of that which I might have enjoyed and used with profit. Are not their taboos in reality like mine, over compensations for exaggerated desire and for extravagant feasting at another time? There is still more, however, in this food idea than merely a desire for something pleasant to the taste. The infantile phantasy is revived still in my dreams where I seek sweet foods, see before me coffee- and

chocolate-colored food, articles soft and yielding like feces, in circumstances plainly associated with sexuality. We saw that the infant and the savage both associate the feces closely with sexuality and the life principle. In my dreams they blend one into another, showing that the infant phantasies connect the taking of food, the passing of feces and the birth of the baby. The savage idea is the same. Food and the feces so full of the life power are so closely associated in their fancies that their use of foods becomes not simply a matter of necessity and pleasure of appetite, nor yet of symbolic ceremonial, but unites all these as I have done, fecal and birth fancies, the element of nutrition concerned in the infantile and primitive mind with the origin as well as the maintenance of life, and then the vast ceremonial, the outcome of these phantasies, and the very means of fostering them. This furnishes, I think, an explanation why so many foods are forbidden to mourners, certain varieties, foods cooked in certain ways, foods from a father's hamlet with coco-nuts, areca-nuts and pig forbidden the son, the widow forbidden to eat of the same kinds of which her husband last partook, those who buried the dead forbidden to feed themselves for a certain time, women in one tribe not allowed to set food before the shrine of the dead lest they shall be barren; this all refers to the close association of food with life as it touches the nutritive side but even more with the reproductive life, which must be guarded from contact with the dead. The reference here to the symbolic form of food is also plain in the taboo placed upon the dead father's coco- and areca-nuts as it is also in a general prohibition put upon bananas and sugar-cane, although yams may be eaten. Very fertile, indeed, are their fancies concerning foods, uniting as they do so many elements, combining and expressing them all in their ceremonies while they amply illustrate and illuminate my childish phantasy, which has continued so persistently in dreams and waking desire.

Among the lowest tribes of our study, those of Central Australia, occurs a belief that relates itself startlingly to a phantasy which I believe underlies all my illness and lies at the foundation of many or all of the phantasies already mentioned. It has taken to itself a special form, causing my mind to dwell upon an imaginary entrance into my vagina of the Spirit of God. At the age of sixteen this first manifested itself definitely to me with

disturbing force in general impure thoughts associated with the Spirit. In the years immediately after this, when as already stated my illness was taking a quieter form, this idea was only a threatening one in the undercurrent of my thought, for a time partially repressed. But a few years later when all the mental trouble came violently into consciousness this, too, thrust itself vividly before me disguised as the most wicked of thoughts. Even in my childhood, possibly as early as eleven or twelve years of age, surely at the age of thirteen and after this, I had always a fear that I might be the victim of rape along some lonely road or in some secluded spot or even in my bed at night, a fear which concealed under its disguise an ever present thought of such an experience and so an unconscious phantasying concerning it. This childish fear continued even at the later periods just mentioned, beside manifesting itself then in a new and more distressing way. This was the constant thought of the entrance of the Holy Spirit into my body in concrete, sexual manner. This has haunted me at all times when standing or walking, sitting or lying down, ever driving me with the fear of the sinfulness of such a thought, and by means of the fear producing all those ceremonials for purification through prayer and also before the prayer, which have served to nurse and continue the original thought.

What do I find now in our comparative study? That my illness driving me along the backward path has again utilized a most primitive phantasy and by keeping it before me for many years has magnified and exaggerated it almost beyond recognition. It is helpful, then, to turn back to the simplicity of this idea as we find it in the lowest races we can study. There in Central Australia a phantasy like mine exists as the simple and only explanation of the birth of a child into the world. These tribes have no religion such as we understand the term, they have not attained to the idea of a deity. But there is a fore-shadowing of such an idea in the belief in their totemic ancestors, who once went about leaving spirit children in certain spots, which were made sacred. These spirit children are always waiting to be born and re-born, for after death they leave the bodies they have inhabited and return again to the same spirit place to await the next incarnation. So there are always spirits waiting and watching for an opportunity to become embodied souls and they lie in wait at these sacred



haunts for passing women, young or old, and no woman, or girl even, who wishes to avoid pregnancy must pass near one of these spots for at any time a spirit may suddenly make its way into her body, when she will conceive and bring forth the new, living body for this eager soul. A similar belief but even more concrete is found among some of the inhabitants of Queensland where a mythical being, Anjea, actually puts mud babies into the bodies of women to cause them to conceive. This is a very concrete form of my phantasy and also suggests the baby of dust fancied at an early age in play with my brother. My phantasy, so long a cause of terror to me, of fear of sinfulness, a phantasy that I dared not put into words, loses its horror and its frightful character, thus simply and animistically expressed in the early childhood of the race.

There are many other points of contact between the psychical life of these peoples and my own. Bad odors, from my own body especially, have not produced in me the aversion that a healthy adult would feel. Instead I have occupied myself with them even to the extent of producing, however unconsciously, a chronic flatulence with resulting fecal odors about my body, especially at night, this then becoming one of the reasons for the intricate ceremonial of prayer and of purification before prayer, as with the other phantasies a cause for the ceremonials and again an object upon which they could react. The customs so common with the savages prove that this is another level upon which we meet. The use of evil odors enters largely into their ceremonial in the disposal of the dead, nor is there with them that repugnance to these odors which would make their practises impossible to cultured races. We have spoken of the use of feces in mourning and of the anointing of the bodies of the living with the juices of putrefaction, even the drinking of these juices. It is very common to leave the dead body unburied until the flesh has completely dropped away, or at best the body is buried in a shallow grave. Sometimes the unburied body is put on a scaffold in a tree, sometimes it is put up in the house. In the latter case it is often the duty of the widow, the widower or others near of kin to remain, it may be for months, shut up in the house with the decaying body; or if the body has been buried the mourner is shut within a hut built directly over the grave, enduring the

stench, the very thought of which is hardly possible to us. There are gods in the spirit land of certain of the inhabitants of the Celebes who will not allow a ghost to enter that land so long as any of his flesh remains upon his bones for they could not endure the odor the ghost would bear with him; but the ghosts themselves are of a different sensitiveness it would seem, for it is necessary in another tribe that relatives shall guard the corpse of the newly dead lest straying ghosts attracted by the odor of decay shall visit the remains with evil intent.

Fear has been a predominant element in all my illness. Theoretically I would not have admitted that my God was pre-eminently a God to be feared and held in terror but all my practises were based upon that idea and I was ever afraid of offending and dishonoring Him; all my ceremonials partook of this fear and my whole life was pervaded by a sense of terror. Most distinct among my early experiences and impressions is this fear in the form of an ever present dread of death, which possessed me powerfully at the age of eight and thereafter, so that I was filled with dread anticipation as day drew to its close and lay awake in secret terror when night had actually come. This fear was with me all the years of my illness with also other manifestations of it, fear of injury in play, terror of rocks falling upon me, of being buried alive, of drowning, of any experience of being smothered, excessive fear of snakes, all of these closely connected with the fear of death and the hereafter. Some of the more childish forms were partially left behind, but it is helpful now to find that these fears all belong to the infant and primitive mind, and to see them embodied in the simple animistic forms of these childish races, stripped of some of the awful value with which my distorted ideas and ceremonials were enveloping them. What religion these races have is grounded in fear. Fear and self-preservation from the objects of it, preservation of their own immortal life principle, inspire the whole burdensome ceremonial of offerings to the dead for appeasing and propitiating them and drive the living to mutilate themselves, even to sacrifice human lives for the comfort and convenience of the ghosts of the deceased. This attitude with them as with me manifests itself in lesser forms through all their experiences with one another and with the evidences of nature. This fear which forbade me so much either by direct

prohibition upon many things or by that spirit of constant dread that shut me from the world about, and further by the wasteful loss of time and strength and opportunity which the constant exercise of the ceremonial put upon me, this has indeed produced a nihilistic effect upon my life. It is so, too, with these peoples. We have just referred to the sacrifice of physical strength and life for the dead. We might think also of the time wasted, the days, weeks, months, even years set apart for mourning ceremonies, the taboos put upon the necessities of life and upon ordinary social intercourse and greatest of all the loss of life through fear of sorcery and witchcraft. This is found in many tribes even from other parts of the world, cited here in comparison with these of the south seas. Illness, death or other misfortune is attributed to the work of a sorcerer, who is detected by means of further sorcery or magic, to us empty mummery, but to them such solemn and indubitable evidence that many a victim is innocently killed as the suspected evil worker in order that the ghost may be avenged. In certain parts of Africa the belief in sorcery as the cause of death has led to the custom of testing by a poison ordeal not one suspected person but even hundreds at a time, so that tribes are rapidly decimated. So great are the power and result of such fear in one's own life that it is well to recognize the same thing in its primitive forms and the dire effect it works where these forms are direct and simple and have unrestrained power in the lives of those possessed by them.

Though my struggle with sexuality and the many phantasies in which it has expressed itself has been very real to my waking consciousness, so much has come to me in my dreams of further phantasies buried in the unconscious and the intricate relations of the many forms the phantasies take, that I can easily understand why dreams have had a great influence upon the beliefs and customs of savage races. With no knowledge whatever of the conscious and the unconscious, and no psychology of dreams to aid them it is not strange that they have interpreted the fact of dreaming as a departure of the soul from the body in sleep or the visitation by a ghost who then communicates with the living, and that the visions of sleep, the phantasies and fulfillment of desires that the unconscious allows in these unguarded hours, should seem to them realities that the soul witnesses and experiences on its nocturnal



journeys, or veritable reports of the life among the dead in the unknown spirit land. There exist the same desires, the same pleasures, the same difficulties, hindrances and misfortunes that are found upon earth but in unreal and distorted form. The dreams bring before them all the phantasies and desires of their own minds making them more vivid, sanctioning them, even making necessary the continuing and furthering of them in all their beliefs and ceremonies referring both to the living and the dead. Their practises are doubtless in large part the expression of these phantasies. So my own infant phantasies, stored in my unconscious even more abundantly than in my conscious life, have manifested themselves through my dreams and though partially understood in the light of a higher intelligence, they constituted another disturbing element, revealing as they did the intense sexuality and "impurity" which buffeted me between fantasy enjoyment of it and struggle against it as evil. Now my dream life is a picture for me of these phantasies, which this examination and comparison have helped to strip of their false values and to put into their proper places; while the importance to these primitive races of their dreams, picturing their desires and fancies, again illuminates how strong a hold the phantasies have and what determining power all unconsciously upon the beliefs and practises of life.

These are only some of the phantasies in which the psychical experiences of my childhood kept alive by my illness are at one with those of the infancy of the race. These interpretations are made from my own intense experience, wherein the phantasies have been very real and compelling forces through my life. Psychoanalysis has very recently taken hold of them and setting them in order for me as related parts of the great, underlying, reproductive power, has made it possible for me to examine them and compare them with the same phantasies as found among these savage peoples, that I might better understand and more rightfully value these things which my illness had so distorted and magnified and misused. The phantasies and experiences here set down have been the source of years of suffering, even while continued in an infantile enjoyment of their fundamental content, an infantile activity that has kept me from fuller and truer adult pleasures and from useful, productive work. Thus set on the right road by psychoanalysis I have been able to make this com-

parative study with great advantage to myself; and I shall find full justification for this detailed revelation of my own psychical life and the interpretations I was compelled to make of the beliefs and ceremonials of the peoples we have been considering, if the parallelism found here between the content of a neurotic illness and of the psychical life of the childhood of the race shall be of any assistance in the understanding and re-arrangement of the disturbing content of some other sick mind.

## DEMENTIA PRECOX IN THE COLORED RACE<sup>1</sup>

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It is a fact recognized by all that the individual in his development relieves the history of the race; he had a period of mere animal existence; a period of acquiring a language; a period of hunting and of the fascination of fire; a period of loving to play with mud and clay and to make baskets; a period of wanting animal pets, which can be trained to do his bidding; a period of trying to till the soil and a period of building; a period of the use of tools; and a period of the development of abstract thought. Upon this fact is built one of the fundamental principles of pedagogy: that a child should be allowed to develop in sympathy with his race trend. It is also fundamental to the full understanding of psychiatry. Again and again do we see an individual, struggling against the awful onslaught of a psychosis, reverting to progressively lower and lower strata of the formation of his race.

The race sense, if so we may call it, is so integral a part of the psychiatrist himself, that often he sees without seeing, and understands without understanding, when his patients are those of his own race. When, however, he is dealing with those of another race, this conformity of experience is lacking, and must be consciously made a factor in the equation before its final solution will be satisfactory.

<sup>1</sup> The existence side by side of the white and colored races in the United States offers a unique opportunity, not only to study the psychology of a race at a relatively low cultural level, but to study their mutual effects upon one another. Dr. Lind has already published a paper in No. 3 of this REVIEW on the dreams of the negro. This paper sets forth something of the anthropology of the negro and should be read in connection with the following paper of Dr. Lind on the Color Complex of the Negro. The two papers mutually reinforce each other.—[Ed.]



Before we think, therefore, of dementia precox in the colored race as it exists in the United States let us see somewhat of their race history. Tillinghast well says: "The institution of slavery has loomed so large on our horizon, that it has completely overshadowed what went before it in African history." The Dark Continent was peopled by many tribes varying in culture from the dwarfed Hottentots or Bushmen who wandered about hunting for food wherever it could be found with no shelter except that given by nature, and with the most primitive of weapons, more like a herd than even the loosely organized clan, to the Negroes of the various small sultanates south of the Sahara and in Uganda, who were very intelligent and courteous, with a very good and substantial form of government. These owned domestic animals, and were industrious farmers. E. W. Blyden, himself a member of the colored race, says: "There are negroes and negroes. The numerous tribes inhabiting the vast continent of Africa can no more be regarded as in every respect equal than the numerous peoples of Asia or Europe can be so regarded. There are the same tribal or family varieties among Africans as among Europeans."

It is probable that contact with the white race during the last few decades has brought no change in fundamental characteristics to the natives of Africa. For this reason we can accept the recent observations of the habits and character of the native tribes made by Roosevelt as equally descriptive of captives from which our ex-slaves sprung. His sefari was reorganized several times, many tribes at one time or another being a part of it. He says: "Untold ages separated employers and employed: The Wakamba are not yet sufficiently advanced to warrant their sharing in the smallest degree in the common government. 'The just consent of the governed' in their case if taken literally would mean idleness, famine and endless internecine warfare." Again he speaks of the "Swahili, the coast men, negroes who have acquired the Moslem religion together with a partially Arabicized tongue and a strain of Arab blood from the Arab warriors and teachers who have been dominant in the coast towns for so many centuries . . . strong, patient, childlike savages who have borne the burdens of so many masters and employers hither and thither, through and across the dark heart of the continent." One of his

later sefaris was composed of Kikuyus, of whom he says: "The Kikuyus are real savages, naked save for a dingy blanket, usually carried round the neck. They formed a picturesque sefari; but it was difficult to make the grasshopper-like creatures take even as much thought for the future as the ordinary happy-go-lucky porters take. At night if it rained they cowered under the bushes in drenched and shivering discomfort, and yet they had to be driven to make bough shelters for themselves. Once these shelters were up, and a little fire kindled at the entrance of each, the moping spiritless wretches would speedily become transformed into beings who had lost all remembrance of ever having been wet and cold. After their posho had been distributed and eaten they would sit, huddled and cheerful, in their shelters, and sing steadily for a couple of hours. Their songs were much wilder than those of the regular porters, and were often warlike."

At one time they were to trek across a region but poorly supplied with water. He says: "We had seen that each porter had his water bottle full before starting; but, though willing, good humored fellows, strong as bulls, in forethought they are of the grasshopper type; and all but a few had exhausted their supply by midafternoon."

He speaks of the 'Ndorobo (Bushmen) as being shy, but knowing their forest perfectly. He says: "Kermit found a cave which had recently been the abode of a party of 'Ndorobo, the wild hunter savages of the wilderness, who are more primitive in their ways of life than any other tribes of this region [British East Africa]. They live on honey and the flesh of wild beasts they kill; they are naked, with few and rude arms and utensils; and in short carry on existence as our own ancestors did at a very early period of Palæolithic time. Around this cave were many bones. Within it were beds of grass, and a small roofed enclosure of thorn bushes for dogs."

Cannibalism was practised by certain tribes. Speaking of the work of various public officials, who were engaged in the government of the native tribes, he says: "And even they had to be on guard no less against the thousands of cannibals in their own ranks than against the thousands of cannibals in the hostile ranks, for, on whichever side they fought, after every battle, the various

man-eating tribes watched their chance to butcher the wounded indiscriminately and to feast on the bodies of the slain."

In strong contrast to this is the picture he gives us of Uganda: "The first explorers to penetrate thither half a century ago, found in this heathen state of almost pure negroes, a veritable semi-civilization or advanced barbarism, comparable to that of the little Arab-negro or Berber-negro sultanates strung along the southern edge of the Sahara, and contrasting sharply with the weltering savagery which surrounded it, and which stretched away without a break. . . . The people were industrious tillers of the soil, who owned sheep, goats, and some cattle; they wore decent clothing, and hence were styled 'womanish' by the savages of the Upper Nile region who prided themselves on the nakedness of their men as a proof of manliness. They were unusually intelligent, and ceremoniously courteous; and most singular of all . . . there were certain excellent governmental customs, of binding observance, which in the aggregate amounted to an unwritten constitution."

Only the most advanced of these numerous tribes have permanent homes. They wander up and down, back and forth, as the desire for food and the chance of war dictate. To quote again from Roosevelt: "Hamitic, or bastard Semitic, or at least non-negro tribes, which, pushing slowly and fitfully southward and southwestward among the negro peoples, have created an intricate tangle of ethnic and linguistic types from the middle Nile to far south of the equator."

Any description of the colored race is incomplete without a mention of their great compensating gift, music. They all sing. Whether on the hunt, or at war, or on the more modern safari, their movements are regulated by a rhythmic chanting, usually led by one who improvises the song itself, either in single words or in strophes, the rest joining in a deep musical chorus until often the singers are thrown into a veritable frenzy. This type of singing has followed our colored people through all the vicissitudes of their slavery, and still lives in their camp meeting songs.

As to the religion of the native African, it is but a belief in witchcraft. Of ethics he has no conception. Every object, both animate and inanimate, possesses a spirit or kra which must not be offended; hence his charms and priests, his witches and his conjurers. In the few cases where a religion has progressed beyond



this stage it has become the most bestial and revolting of rituals, built upon cruelty and sexual excess.

This race has no mythology. Taken as they were from savagery and hurled headlong into civilization, there was no opportunity for its development. Their nearest approach to it is the Brer Rabbit, Brer Fox and Brer Wolf of the Negro folk lore, preserved for us by Joel Chandler Harris in his stories of Uncle Remus. In these we see the vestiges of the African belief, that each object has its own kra. These stories however were no sooner formulated than they were subjected to the pitiless glare of fuller knowledge, and their being absorbed by the developing race and made forever a part of its unconscious thought was impossible. Therefore we cannot find a counterpart in their own mythology for the symbolism our patients show, and interpreting the symbolism of one race by the mythology of a wholly alien race is liable to lead us astray.

These tribes, constantly wandering about, were constantly at war with each other. The victorious tribe as a rule made slaves of at least part of their former enemies, and promptly intermarried with them, or sold them to some other tribe if they themselves did not then want to be bothered. Because of this, Africa south of the Sahara has well been called a "vast ethnic whirlpool." Through it all, migration was slowly westward. The peoples of the drier, cooler parts of the continent gradually became superior, and drove the inferior tribes toward the coast. Keane says that this region held the sweepings of the Sudanese plateau, and Ellis speaks of the West Coast natives as the "dregs and off-scourings of Africa."

From this West Coast our first slaves were brought. Many of them were from the inferior tribes of this region, but also many came from the more advanced tribes of the interior, sold most often by their victors in war. The only selection made was a physical one: only the most perfect animals were taken for this purpose—no attention was paid to their mental or moral status. Again a rude selection was exercised on the slave ships, for only the most fit endured the journey. For these reasons the progenitors of our slaves were well calculated physically for the work which lay before them, but as to the better qualities of mind and soul there was much to be desired.

Tillinghast well describes these people. He says: "The psychic nature of the West African exhibits most of those immaturities so common among uncultured savages, and analogous to childish thought and action in more developed races; there is more spontaneity and less application, more intuition and less reasoning power. They can imitate, but cannot invent, or even apply. They are deficient in energy, and great in indolence, submissive to despots, improvident. In temperament fitful, passionate, and cruel, though often affectionate and faithful; sensuous, with little sense of dignity, but not self conscious. They are peculiarly deficient in that strength of will which gives stability of purpose, long staying power, and self control in emotional crises. They are of a happy-go-lucky disposition, and greatly averse to exercising care over anything. Rather than surmount an obstacle, they will go around it, and the time so lost is of no consequence."

Of these people, not one race but individuals from many races, all in the state of barbarism, but differing by whole ethnic periods among themselves, was demanded the most wonderful thing of all history. Under conditions of great stress, they were torn from their own land, and sent into a new one, of different climatic conditions, with an entire change of food, with a language so utterly unlike their own that even yet their descendants speak it imperfectly. Of them, who in their whole race history had not known what it was to follow a definite, long continued task, was demanded that they work as did their Caucasian masters: of them, who had as yet no moral standards, was demanded that they measure up to the lofty ideals of life and conduct those Caucasian masters had slowly formed for themselves from the forgotten chaos of their own barbarism: of them, whose only conception of religion was the malign power of witchcraft, and whose creed affected only their attitude toward their gods, not toward their fellow men, was demanded that they kiss the cross of Christ, and assume forthwith all the Christian virtues.

Civilization is not to be donned like a garment. It is to be attained through generations of patient and persistent striving. How well these "strong, patient, childlike savages" have accomplished the Herculean task set them can be seen by comparing our American negro with the race as it still exists in Africa. All honor to the race which has accomplished the impossible.

Hard as this was in its beginning, this bondage in reality was a wonderful aid to the colored man. The necessity for mental initiative was never his, and his racial characteristic of imitation carried him far on the road. But after he became a free man, the conditions under which he must continue his upward progress became infinitely harder. He must now think for himself, and exercise forethought if he and his family are to live at all; two things which had so far not been demanded, and for which there was no racial preparation.

It has been said by many observers whose word can scarce be doubted, that a crazy negro was a rare sight before emancipation. However that may be, we know he is by no means rare today.

We are beginning to think of insanity as a failure on the part of the individual to adjust to the demands of his environment. In the upward spring of any race it is inevitable that many individuals will fall because of their inability to change with changing conditions. With this in mind, we can understand why insanity should be on the increase in the colored race, for of it is being demanded an adjustment much harder to make, when we consider the factors to be used in the problem, than any other race has yet been called upon to attempt.

Dementia precox is essentially a deteriorating psychosis. It is protein in its manifestations, every case being a case by itself; so that we are reminded of Lombroso's dictum concerning pellagra, "There is no disease, only the diseased."

Because the colored patient already lives upon a plane much lower than his white neighbor, actual deterioration in the individual must be differentiated from the supposed loss of a racial period he has not yet attained.

As this psychosis exists in the colored race, it differs in no essentials from the picture so well known. Its etiology is the same. The race, because of the vicissitudes of its history, is peculiarly prone to this form of mental trouble. The last hundred admissions to the female colored receiving service of the Government Hospital for the Insane have contained thirty-seven cases of dementia precox. Diefendorf says that this disease comprises from fourteen to thirty per cent. of all admissions to institutions for the insane.

Hard as it is to get a reliable history either from the patient



or from his relatives, fractional as are the relationships of those supposedly of the same family, and poor observers as these people are of each other, nevertheless a strain of heredity is often found, although it is necessarily short, being invariably lost in the darkness of "'fore de war."

The two great exciting causes, worry and emotional shock are found repeatedly. Worry over the waywardness of son or daughter; over the growing difficulty of making both ends meet; or over the very real neglect of a lazy husband are many times assigned as the cause. As to shock, acute excitements followed in specific instances: the sudden insanity of a beloved brother; the sudden death of a dear sister; and again of a mother; and in one patient, a deep catatonic stupor followed the institution of divorce proceedings in which she was named as correspondent.

The pathology of this disease, so far as it is now known, shows only evidences of a deteriorating process—lipoid degeneration, reticular degeneration of the ganglion cells, proliferation of neuroglial tissue, and Kornchen cells. It is axiomatic that race can have no bearing upon this.

As to its symptomatology. We find little change in apprehension. The patient is alive to her surroundings, is approximately oriented for time, knows where she is and with whom she is associated. She is cognizant of the happenings of her small world, although of the greater world without she may care nothing. In acute cases of confusion or stupor, she often appears perfectly oblivious of anything that may be done or said. However her apperceptive faculties may be said to be working automatically, for when she has recovered sufficiently to give expression to her disordered thoughts she is found to have a fairly complete record of the passage of events during that time.

There is the splitting of the personality as described by Bleuler, plainly to be seen, and often recognized by the patient. Several recovered patients have spoken of this: "I wanted to do so and so, and I didn't want to do it." Lesser grades of the splitting of the psyche, seen in a lack of harmony between the affect and the idea are repeatedly seen.

Voluntary attention, the "staying power" which carries a disagreeable or difficult task to completion, is already deficient in

the race. Hence its impairment under a psychosis is usually more apparent than real.

Because her work is most often constant repetitions of some form of manual labor and usually is directed by someone else, we often find this disease quite far advanced in one whose ability to earn her daily bread has not been disturbed. Her racial characteristic of imitation and "submission to despots" is not easily lost. One woman, a greatly excited precox, with impulsive tendencies, when asked if she were crazy very promptly answered, "'Deed, I ain't crazy! I can scrub as well as I ever could." She had for years earned her living by scrubbing floors; she had worked to within a very short time of her admission, and even when still greatly excited in the hospital, she would come from her room and scrub the floors of the ward spotlessly clean. Again and again in talking with the relatives of patients, do we hear, "I don't see how she can be crazy, she did her work as well as she ever did." Many colored servants come to us from white families, and their mistresses, in speaking of them, will say, "We knew that she had been queer for a long time, but her work was not changed."

This is not to be interpreted as meaning that the precox patient of the colored race does not lose his ability to carry on that line of work which had been his before the onset of the psychosis, for he does lose it as absolutely as does one of a higher race. But it is a much later development in the course of the disease. Whereas in the Caucasian race this is often the earliest and perhaps for some time the only manifestation, in the Negro race, when the ability of the patient to carry on his daily task is impaired, the disease is no longer in its incipency.

During its years of savagery, the race had learned no lessons in emotional control, and what they attained during their few generations of slavery left them unstable. For this reason we find deterioration in the emotional sphere most often an early and a persistent manifestation. We see the precox indifference early in the history of our cases. One rather intelligent colored woman, who was trying to give a history of her sister, a newly admitted patient, could only say, "She just didn't seem to love us any more." On the other hand, a hyperreaction to slight emotional stimuli is very common. This same patient would often cry loud

and long when her sister visited her, merely because her sister "was so good to her." In several cases of the catatonic type have the patients been seen, perfectly rigid and motionless, with a mask-like expression of face, with great tears rolling down their cheeks, there being no extraneous cause discoverable to account for it.

As this race exists in Africa, its sexual instincts are peculiarly unrestrained, and although they have learned much moderation, these desires are usually fully satisfied with no feeling of having done wrong. This will account for the fact that the ordinary sexual perversions are seen among precox patients of the colored race much less frequently than among those of the white race. A masturbator upon the female colored wards of the Government Hospital for the Insane is rare, and smearing of filth is much less common than upon the white wards. During the last eighteen months pleasure in self mutilation has been seen in but one colored woman, and it was then a transient manifestation. For the same reason they seldom have recourse to symbolism in this sphere. The experience of the writer has been that her patients usually will speak freely and unreservedly of this portion of their lives, and buried complexes do not seem to exist. Even their dreams are frankly wish fulfilling, and are as frankly described.

Somato-psychic sensations are common in all forms of precox. One woman complained that she felt like a wooden woman. Another, a young girl, looked in surprise at her body when coming from her bath, and said "This is not *my* body, where is *my* body?" Later the same patient said that her head did not belong to her, and in apparent seriousness asked a fellow patient for hers. Still another insisted that her head had been cut off.

Hallucinations are common. These are the familiar disturbances of the visual and auditory spheres, and of tactile and thermic sensations. They are, however, many times given a most primitive interpretation. The patient sees ghosts and hears them talk. She has been conjured, or someone has wished a spell on her. The sheets are bewitched, hence their burning her.

Dementia precox in the colored race is seen in its three chief forms, hebephrenic, catatonic, and paranoid, their relative frequency being in the order named, as is the case in the Caucasian race. The catatonic type is very pronounced. Its three cardinal



symptoms, resistance, negativism, and mutism, exist in so extreme a degree that it seems impossible they could grow deeper. A foreign psychiatrist,<sup>2</sup> well known by his work on schizophrenia, in a recent visit to some of the institutions for the care of the insane in Jamaica, was told that catatonic precox did not exist in their colored patients. This is far from the experience in the Government Hospital for the Insane. In the last hundred admissions previously spoken of as containing thirty-seven cases of dementia precox, there were eight cases of the catatonic type, all quite severe. The following<sup>3</sup> is the history of one of them, who, oddly enough, is a Jamaican.

The family history shows no nervous or mental trouble in antecedents or collaterals. The patient was born in Jamaica, about forty-four years ago. Her father was a fairly prosperous merchant, the father of a large family. She attended private schools, receiving about an eighth grade education. After her schooling was finished she remained at home, it not being at that time necessary for her to be self supporting. She was an excellent seamstress, and sewed a little, more for pleasure than for profit. Her mother died, her father married again, and there were several half-brothers and sisters. The family relations, however, were harmonious. Later, her father became bankrupt, and the older members of the family, among them our patient, went out to earn their own living. She had a sweetheart, concerning whom she has always been extremely reticent, who left her to marry another at the time of her father's financial difficulty. Our patient went first to Costa Rica, at the invitation of a friend, where she sewed for the next three years, supporting herself but saving no money. Then she decided to come to America. She entered at New York, and for the following three years sewed in that city. Between two and three years before admission to the Government Hospital for the Insane she came to Washington, to be with a better class of her own race. She continued to sew, alternating this with hair dressing. She managed to save a little money, but work was irregular, and there would sometimes be several weeks when she would have no engagements.

<sup>2</sup> During his visit to the Government Hospital for the Insane Prof. Bleuler told the superintendent of his trip through various institutions of the same class in Jamaica. There he was told that they had no, or very few cases of catatonic dementia precox among their colored patients.

<sup>3</sup> Case No. 21117.

Her attack came suddenly, in March of 1913. She felt that her head was tightening, and rushed into a nearby Y. W. C. A. to demand that someone massage her scalp. She was taken to one of the general hospitals of the city. This sensation persisted, and there was added to it a feeling of twisting in her muscles. She massaged herself constantly. This served to straighten out the twists, but they returned as soon as she ceased. She frequently became frightened at this, and would scream at the top of her voice. She was removed to the Washington Asylum Hospital. Her somato-psychic sensations persisted for sometime, but gradually lessened and finally disappeared. At this time she had many visions, which she always recognized as such. They usually pertained to Heaven, and to the future. She thought the Lord was trying to show her by this means that he would help her through all her troubles.

Upon admission to the Government Hospital for the Insane she was quiet, adapted herself with ease to her environment, and was careful about her personal appearance. She seldom initiated conversation but when spoken to, answered in a pleasant manner. She was oriented in all spheres, but was lacking in insight. Memory was apparently not impaired and she responded well to the special intelligence tests. She had hoped to be discharged when she appeared for her trial, but instead she was formally committed to the Hospital. She then gave way completely to her psychosis. She was emotionally depressed; she walked aimlessly about the ward, gradually becoming more and more disturbed. She became untidy in appearance, and would not allow her hair to be combed. She held saliva in her mouth for hours, finally expectorating it about the floor. She removed her clothing and threw it out of the window. She finally became mute, resistive and negativistic. She would assume various constrained catatonic attitudes which she would hold for hours. One most often seen, was standing with her right arm raised straight above her head, the index finger pointing heavenward and the other index finger upon her lips. This condition lasted until the middle of the summer, when she slowly began to improve. After several weeks she had apparently recovered. She could then recall in detail all the events of her sickness, and her insight was good. She could explain her various actions only by saying she had to do as she did, and whatever was asked of her she felt impelled to do the opposite. She complained that any thought, once admitted to consciousness, tended to repeat itself indefinitely, ceasing only if replaced by another which in its turn would repeat.

Remissions, which are apparently recoveries, are by no means

rare. Because the patient has not so very far to climb back to her original estate, she can usually return to her former sphere of life, take up her work where she dropped it, and show practically nothing of the storm through which she has passed, although a recurrence of her trouble is liable to follow another strain. Other patients who do not become well enough to leave the hospital, are yet capable of doing a great many of the tasks well to which they have always been accustomed, and are the best workers of the institution on their own or neighboring wards, and in the laundry.

All forms tend to dementia, and the end picture of this dease, in this race as in others, is a purely vegetative existence.

The following case history<sup>4</sup> shows very well the primitive character of these people.

The maternal grandparents were slaves on a Virginia plantation, while the paternal grandparents belonged to a Maryland family. One maternal aunt and one maternal cousin have been insane. The father was formerly of alcoholic tendencies. Further than this no nervous or mental trouble, and no wasting physical diseases appeared in the history. The patient was born in Maryland about thirty years ago. She lived the ordinary life of a little colored girl, having the usual diseases of childhood. She attended school but little, and can now only read. Her industrial life began early, minding babies, helping about the house, and assisting the cook, until she was finally able to take a regular place of service. She has always worked for the better class of white people, and has always been well liked by her employers. In 1911 she went to Philadelphia and became cook for Mrs. G —, where she has remained since. In the early summer of 1913 she began feeling ill, but continued at her place of service. The upper part of her abdomen became "all puffed up." She thought she was too poor to consult a physician, so she went to an herb doctor, one of her own race. He gave her four different kinds of herbs from which she made an infusion, taking a wine glass full three times a day. In all she paid him twenty-five dollars, but he failed to help her. She then went to another herb doctor whom she had previously known. She had often gone to him for sage for her hair, and he had given her many worthless presents. She described him as being a little, low, West Indian man, most immoral in practices. He told her there was a snake inside her, and gave her some medicine to enable her to get rid of it. She took but one dose, and was then unaccountably

<sup>4</sup> Case No. 21130.



impelled to break the bottle. She was also impelled to throw away her gold watch, and she blames the West Indian for the impulse, although he never told her to do this. He did, however, tell her to change her rooming place immediately or she would be sorry. She obeyed with childlike faith. The next family with whom she lived put powder in her trunk and she even felt it in her pillow. She tried to protect herself by putting the Bible under her pillow, and getting into bed on the opposite side. In the mean time her "puffiness" disappeared. Her herb doctor finally told her there was nothing the matter with her except that she "needed a man," and tried to force himself upon her. This she steadily refused. Her persecutions became so constant that she finally told Mrs. G —, and also asked for the loan of a dollar. This was given her and she threw it away. She asked for another, which was given her, only to be in its turn thrown away. During the night she awakened with rapidly beating heart, at hearing a voice say, "Go get \$135, go get \$135, go get \$135." Three times that night she returned to the home of Mrs. G.—, upon the last trip opening every window in the house. The herb doctor was in some peculiar manner connected with these impulsive acts, but she cannot formulate her feelings concerning this.

At this point in her sickness the patient was taken to the home of her sister in Washington, D. C. (It might be added that the West Indian tried to follow her with letters, but these the patient never saw.) She now became greatly excited; beat her head against the wall, fought everyone who came near, and put her brother-in-law bodily out of doors. She took off all her clothing, threw it out of the window, went to bed and stayed there. She would neither eat nor talk, thinking the Lord did not want her to, although she never heard His voice telling her so. She now became very sure that the herb doctor had put a spell on her and she read her Bible constantly, to exorcise it. She was admitted to the Washington Asylum Hospital. While there she persisted in her refusal to eat or to talk. She now thought the food was unholy and the people about her unholy. She read her Bible, and prayed all day long. When brought to the Government Hospital for the Insane she no longer cared what might become of her. She was at first mute and refused food, but after a few tubings she began to eat and to talk. She asked for her Bible, but fearing that she would again draw within herself this was refused. She tried to console herself by singing hymns and repeating verses from the Bible. Of these, however, she knows very few. She often begins, but never finishes, the twenty-third Psalm. This she says is not in the Bible, the Lord just gave it to her. She is about the

ward all day, and in spite of herself more earthly matters are gaining entrance and she is gradually coming forth from her seclusion. However her faith in spells in general and her own spell in particular is unshaken.

In view of what has already been said this needs no comment. From another case,<sup>5</sup> we learn the following:

The only thing of note in the family history is that the patient's father was an alcoholic. The patient was born in New Jersey and is now about forty-four years old. She has considerable white blood. She lived an ordinary, uneventful life, attended school in the District of Columbia, and graduated from the Normal School. She then began to teach, but never was very successful, discipline being especially hard for her. She was noticeably hysterical while still in school, and after having taught a while dementia precox became evident. She was admitted to the Government Hospital for the insane in February of 1888, being then acutely excited. She was discharged after five months' treatment, and again tried to teach. She however met with no greater success than at first. There was a recurrence of her excitement in 1901, and she was again admitted to the hospital. After three years she was discharged. Then she remained at home, doing nothing. She grew steadily more and more indifferent, headstrong, mischievous, and destructive until it was again necessary to bring her to the hospital. At the present time there is but little of her former mentality. The picture has been fully painted with the brush of deterioration. She is dull and apathetic, quite indifferent to her surroundings. She cannot remember her place at the table nor her bed. She refuses to remain properly dressed, and tears her clothing into strings. She is especially untidy as to her hair, which she pulls about her shoulders as soon as it is combed. She is habitually untidy in habits. She cannot remember the people with whom she is daily associated, and although she seems to remember her mother at her visits, the visit itself is forgotten as soon as it is over. She crouches all day upon the floor, singing softly to herself.

In this case we see the wreck of one of the more advanced of the colored race, one far removed from the young girl of the preceding history. There is also no evidence at present to be obtained of the very primitive thought content of the younger one,

<sup>5</sup> Case No. 20110.

and in view of her definite attainments we would not expect to find it.

Dementia precox is dementia precox still, though present in an already primitive race. "There is no disease, only the diseased."

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## THE COLOR COMPLEX IN THE NEGRO

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In the case which I wish to discuss somewhat in detail, the most striking aspect of the delusional field has as its foundation a complex which is extremely common, one might almost say, universal, in the negro. This complex is based upon the social subordination of the negro in the United States, and as the most obvious racial distinction serving to set him apart from the more favored race is his color, I shall refer to it hereafter for the sake of convenience as the "color complex."

That the color complex is present even in negroes presenting no evidence of a psychosis might almost be accepted as a truism. I shall mention, however, a few evidences of this. In the somewhat primitive theological conception which obtains among the negroes, the Deity is personified as a white man, the angels also are white. Apparent exceptions to this must be noted. I have seen works of art for sale in stores catering to negro trade, representing scenes in Paradise, translations, etc., where the celestial figures were black, a startling, vivid black. The motives prompting such production, as well as those which might actuate their purchase and their acceptance as a faithful representation of the future state are probably a note of defiance, a protest against the orthodox color scheme of salvation, and by inference a recognition that the latter does not exist. But these are exceptions and the rule which will be verified by any one who has had considerable dealing with the negroes is that the future blessed state according to their ideas is one in which they will display a spotless integument and the first ceremony in the ritual of their entrance to Heaven is the casting aside of the ebony husk.

I have observed in the dreams of negroes that frequently there will be presented some such dream picture as this, "I saw

my girl and she was white and talking to a lot of white people." Or the dreamer finds himself in the company of white women or men who treat him as an equal. Usually in these instances, the dreamer adds the significant statement, "I could not see what color I was myself." Accepting these dream pictures as wish-fulfillments,<sup>1</sup> according to the Freudian doctrine, we have them as further proofs of the repressed wishes present in the negro, i. e., to be white.<sup>2</sup>

The study of word associations in negroes would probably bring out disturbances in reaction to such words as "black, white, negro, skin, colored," etc., but as I have not studied these in mentally normal negroes to any extent, I can not generalize. However, in such of the negro inmates of the Government Hospital for the Insane as I have been able to try the word associations, I have noticed marked disturbances in the reaction to these words.

The acceptance of the superiority of the white race, or rather the general acquiescence in the desirability of Caucasian blood is further evidenced by the fact that mulattoes are prone to boast of the admixture of white blood, usually exaggerating this considerably in spite of the fairly obvious inference that such heredity is almost certainly tainted, to say the least. On the other hand, they never boast of the Ethiopian strain.

Whether then we accept or deny the hypothesis of the ubiquity of the color complex in the mentally normal negro, no exhaustive study of psychoses in negroes is necessary to show that it exists in very many of these and often moulds largely the topography of the delusionary field.

Adler<sup>3</sup> in his monograph on the nervous character is inclined to give a less important part in the etiology of mental disturbances to the sexual factor than Freud. He discusses at length, the conflict in the life of the individual with the "will to power," of Nietzsche,<sup>4</sup> and holds that this, with a sense of inferiority, is at the bottom of a large proportion of disturbances in the individual psychic life.

<sup>1</sup> Freud, S. Traumdeutung.

<sup>2</sup> Lind, J. E. "The Dream as a Simple Wish Fulfillment in the Negro." *PSYCHOANALYTIC REVIEW*, Vol. I, No. III.

<sup>3</sup> Adler, A. Ueber den Nervösen Character.

<sup>4</sup> Nietzsche, F. Genealogy of Morals.

This sense of inferiority is concretely represented in the negro by his color and when he has failed to adapt himself to reality it is not surprising that he compensates himself by the creation of a new order of things: He makes himself white, his seeming dark hue is due to a disguise which he has adopted for one purpose or another, or it has been acquired accidentally. By the simple conversion of his outer skin into another color, he symbolizes his identification with the, to him, superior race, the white race. He is then on a par with the more favored beings and as such has adjusted himself with the world. With the simple change of color as a starting point, he may elaborate an individual world, the completeness and consistency of which depends on such factors as his power to visualize, his ideation, memory, etc.

A number of cases from the wards of the Government Hospital for the Insane might be described, illustrating delusional fields based on the color complex, but the limits of this paper do not permit, and the case I wish to present in detail is somewhat lengthy. So, I shall only mention a few of these very briefly.

I. Case of A. W. Hebephrenic dementia precox. This patient claims he is a white man. He is unable to explain why he is not the same color as other white men, but shows the palms of his hands which are very light colored as is usual with his race, and says that shows what his real color ought to be. Asked if his parents were white, he says he never had a father or mother, but came into the world by himself.

II. Case of G. A. Senile dementia. This patient says he is white and that all his relatives were white. He accounts for his present color by saying that dye in the water in which he washed changed his color. He has often dreamed about doing business with white merchants who seemed to treat him as if he were a white man and their equal.

III. J. M. Paranoid dementia precox, or paranoid state. This patient, as nearly as can be ascertained, seems to entertain the idea that through his mother he descended from an Ethiopian prince who at one time conquered and ruled over Egypt. The ancient Ethiopians, he holds, were not black, but came from Eastern Asia and were light colored.

IV. Case of G. W. Hebephrenic dementia precox. Patient



states that this institution is an Indian reservation and that he himself is a full-blooded Indian. He is being shut up here by the Government because he would have too much influence among the Indians if he were at large.

V. Case of J. B. Hebephrenic dementia precox. This patient, who is very much deteriorated, spends hours of every day washing his face and hands. He is quite inaccessible, but when repeated attempts are made to learn the reason for this, he says, "Get paint off." No further explanation can be obtained, but it does not seem an unwarranted deduction that he believes his color to be superimposed.

VI. Case of W. M. Paranoid dementia precox. This patient who is so light colored that he would pass readily for a white man, came to Washington to see the President on account of persecution to which he had been subjected for several years. It seems certain persons accused him of trying to pass as white and formed a society to get him into trouble. Several white society girls in his home town were implicated in it. They tried to lead him on so that he would endeavor to take advantage of them, and then they would have a definite charge against him.

VII. Case of P. S. General paresis. He says, "I am going out pretty soon and get white. You see that silver on the roof

VIII. Case of P. S. General paresis. He says, "I am going out and take a bath in that and turn white."

Dr. Mary O'Malley in charge of the female department of the Government Hospital for the Insane, assures me that the color complex is often found cropping out in the delusional field, and quoted me a number of cases. A few of these will suffice for illustration:

VIII. Case of S. E. Colored female. Paranoid state. Six or seven white boys of whom the ring-leader lived in the flat above her and called her names of an extremely vulgar character. Colored men are jealous of her because she is married to a white man.

IX. Case of A. L. Paranoid precox. This patient states she is a white woman; the present color of her skin has been caused by eating dark-colored food. She calls the physician her daughter and the nurses her children.

X. Case of M. B. Paranoid precox. This patient says she

is a white woman, the only white woman on her floor. She accounts for her color by saying that some one has put the color of dyed animals on her.

The case which I wish to present in full, is that of M. C., a colored male, aged thirty-three, who is serving a life sentence for murder in the second degree. Very little information is obtainable about his heredity, and this little is negative. As far as can be ascertained, he never had any serious physical disease, with the exception of gonorrhea, at the age of nineteen which lasted two months and was followed by a stricture. His school life lasted from his fifth to his sixteenth year, and it is not known what progress he made as the information was obtained from the patient himself, and his statements are grandiose in the extreme. He has been a laborer, and also learned the barbering trade, which he gives as his occupation. He has never married and nothing abnormal sexually can be learned. He drank beer and whiskey freely and has been intoxicated on a number of occasions. Twice before his present trouble he was arrested and convicted of minor offenses.

In 1907, at a negro picnic, he became involved in a quarrel with another negro over a woman and a bystander essayed the role of peacemaker. The patient had an open knife in his hand with which he was cutting meat, and in the scuffle, stabbed the peacemaker, who afterwards died. The patient was tried, convicted, and sentenced to life imprisonment. He arrived at the Leavenworth penitentiary in 1907.

The exact time of the onset of his psychosis unfortunately cannot be learned, as the prison record obtained with him gives scant information on this subject. It merely shows that he was admitted to the psychopathic ward there, October 20, 1912, and that "for some time previous to that he had been under observation on account of erratic behavior." This behavior as nearly as can be learned was:

He called the attention of the prison physician to a tattoo mark on his hand and stated that he believed that he was not a negro, but painted black. He also expressed ideas to the effect that he had built a number of prisons and railroads, that the warden owed him \$40,000, that he was a detective, an author, etc.

The ward notes made by the attendant in the psychopathic

ward in the prison are mostly statements that he "wanders in his talk." We also learn that on October 21st, "Claims he built this prison and that it is an exact duplicate of the Capitol Building, at Washington." October 22, says he built all prisons and railroads in this country. October 26, says he must get out as "he has a contract to build a big railroad." October 27, says "he has a secret paint which he can use that will turn him white."

Here as nearly as can be learned, is the second expression of the delusionary idea which becomes so prominent. He is now groping about, as it were, for satisfactory refuge from the world of reality and hits upon this secret paint. Later, as we shall see, this does not suit his purpose, and the idea is modified.

November 8—"Says he has a contract to build a prison in Washington, D. C., and is waiting for his railroad contracts to be signed."

November 10—"Says he has poisoned water in his cell. Can kill a million people."

This is the last note made on the case as he was shortly afterwards transferred to this hospital, but while in the psychopathic ward he wrote two letters to the warden and the prison physician, in which he refers to the money the warden owes him, the contracts which await his signature and states, "I left some oil in a can in the storeroom that will take this paint off."

M. C. arrived at this hospital on December 6, 1912. The physical examination was negative, with the exception of some fine tremors of the tongue, eyes and fingers, the urinalysis was negative and the Wassermann reaction with the blood serum was negative. Examination of the cerebrospinal fluid was negative in every respect.

A mental examination made shortly after admission showed the following: (The scheme in White's "Outlines of Psychiatry"<sup>5</sup> was used.)

Patient was accurately oriented in all spheres. He was neither depressed nor elated, but appeared rather impatient to be put in communication with his white relatives and friends so that he might take his place in the world again. No hallucinations were obtained. There was absolute lack of insight. Memory

<sup>5</sup> White, W. A. *Outlines of Psychiatry*, 4th Ed. No. 1. Mental and Nervous Disease Monograph Series.



and intelligence did not appear to be impaired. The whole psychosis seemed to consist of a confused mass of delusionary ideas, the most constant of which were those about his color. He stated that he had assumed his present disguise a number of times in the past, in order that he might mingle freely with the negroes to carry out certain business and political projects. He had also adopted, so to speak, a negro family of the same name as his own and when he was wearing this disguise he lived with them the more completely to fool people.

Other delusionary ideas which do not seem to play as prominent a part, are that his victim did not really die, but only simulated death, that he built a town called Washington, in Louisiana, exactly resembling the Capitol City and that there he was a leading citizen, that he built numerous prisons and railroads, that he "immigrates," as he expresses it, people to parts of the South, West, etc.

The physician's notes made on this patient during the year and a half he has been an inmate of the Government Hospital for the Insane, have shown little or no change in him. He has perhaps become more unintelligible, especially lately when more determined efforts have been made to uncover the mainsprings of his psychosis. He has been at all times a quiet, well behaved patient, has assisted with the ward work and associated freely with the other patients.

Practically every morning he accosts the physician on his rounds and makes some request relative to his main delusionary idea. Now he wants a half a pound of Epsom salts with which to bleach himself, again some fish-oil which may remove the paint, etc.

He is quite a prolific letter writer; his productions are directed to presidents of banks, merchants and other prominent men in Washington and a town in Virginia where he formerly lived, requesting "that they come up here and identify him as a white man." The following from a letter addressed to the doctor, is quite typical:

#### " PREFACE

"I am perfectly that you could ignore the fact that I has this paint own myself and that I would hafter to stay here a long time if you

did not tell it for me the fact is if a hostile is not a place to tell such a thing as a disguise I don't know the place that is I have been here ten months and have spoken to each Doctor about the Disguise and know that I have had dealing with each one of them that would make them perfectly aware of the fact you would not look this over carefully and give me some."

During the past few months, many efforts have been made to get in communication with this patient, but his defenses are so many that these have been of little avail.

In addition to the information given above, the following features of the case may be of interest:

He says that the time he committed the crime, he had on the black paint. He says he had himself painted black because the colored people had him tangled up in certain laws he had made, so he wore the paint for a disguise. He further states that he was doing some work for Lincoln and didn't want people to recognize him.

He has known thousands of white women and men and has rescued white people from the Indians.

Concerning his crime, he says he knows that the man isn't dead because twice before he saw the same man in the morgue laid out for dead.

An effort was made to get at the mechanism of this patient's psychosis by his dreams, but little could be done along this line. He did say that he had dreamed of being with white women and men whom he knew, but attempts at analysis were futile.

One hundred word associations were tried with M. C., but instead of giving a reaction word, he evidently picked out objects about the room and gave them at random to the stimulus words, as table, pen, ink, cuspidor, etc. Then the list was repeated, but in no instance was the same reaction word given. The average time was  $2\frac{1}{10}$  seconds but it should be noted that the reaction time to "negro" was seven seconds and "to paint," nine seconds. The reaction word "to cover" was "milk," (possibly an association of milk with the perfect white), the reaction time was four seconds and it was reproduced as "paint." "To paint," after nine seconds came "scrape," reproduced as "brother." To "negro" was given "watch," reproduced as "window."

So as we sum up this case and try to understand the forces which have been at work to produce such a grotesque delusional field and such apparent dilapidation of ideas, we are confronted with several difficulties. The two chief are, first—the inadequate history of the inception of the psychosis, and second—the present inaccessibility of the patient. We can at best but give what appears to be the explanation.

We will picture to ourselves then, M. C. as he was seven years ago, a fairly typical negro, loving the physical excitements of life, as his race does, the warm sunshine, the catchy music, the alcoholic glow, the vivid color, the one hundred and one things which make existence happy for the negro in the summer time. He goes to a picnic, there is a brawl and presto! he has killed a man. Swiftly succeed the jail, the court room, the convict train and the penitentiary. He is now a murderer, doomed for the rest of his days to be shut away from all which made life enjoyable to him.

How long a period passed before his adjustment to the scheme of things began, we do not know. It was over four years before his lack of harmony with his environment was sufficiently obvious to his jailers to make them suspect mental disorder. Probably there was a period during which his being was benumbed, so to speak, by the blow which had fallen. Before he began to react to the reality which had suddenly closed in on him, there was a time when his vital forces were stunned, the shock was too tremendous to be believed, at first, and he laid it aside for future and fuller consideration. Then, too, during the first year or so of his imprisonment, there may have been hopes which died hard. He may have cherished the idea that he would find some way of escaping or that the powers that be would realize that his sentence was too severe and mitigate it or pardon him entirely.

But as the months grew into years, he sees these faint hopes fade away and at last he is face to face with reality, the reality of a lifetime in prison. He must accept it or battle with it. He refuses to accept it, but resists it and gradually he changes reality.

As we see him to-day, he is living in the world that he has created about himself, the universe of which he is the center, the "Deus ex machina." If we can not orient ourselves in this dream world, it is because the patient alone possesses the open



sesame to its mysteries. Around his city, he has thrown a wall of unintelligibility; if we try to talk to him now we find he speaks another language than our own, he coins new words and gives utterance to phrases and sentences which have no apparent meaning and no place in the context. This is his final and most effective protection from reality.

Briefly then, the patient has compensated himself for reality in three main ways:

First, he is not a murderer because his victim is still alive.

Second, he is not imprisoned for murder because he himself built and owns the prison.

Third, he is not the negro imprisoned for murder, because he is a white man disguised as a negro.

The first of these compensations he does not seem to have elaborated to any great extent, and I think this is due to certain racial characteristics. A white man under similar circumstances would be apt to choose the simplest defence to a charge of murder, the "corpus delicti" of the law, i.e., there had been no murder committed, but the victim simply feigned death. In the Government Hospital for the Insane, we have a beautiful illustration of this in a murderer who has built up a complete delusionary field practically on this one idea. But this simple explanation does not suit the negro, just as in a law-court a negro is not satisfied to deny a fact by one plain contradictory statement, but must discourse at length on the reasons why he is not guilty,—like the lady in the play, he is inclined to protest too much.

The second method of compensation presents much more detail, as does the third, probably because they are founded on complexes which have existed from earliest childhood, the poverty complex, and the color complex. In reality they may almost be called one complex for he evidently symbolizes superiority by the color white.

There is perhaps, a fourth method of compensation which seems to be a comparatively late development, and is not yet fully elaborated. As nearly as can be understood, the whole thing is a case of mistaken identity, due to the fact that there is a town in Louisiana called Washington (this is really the case but the same thing is true of most States, and the town of Washington, Louisiana, is evidently very small judging from the information

I have been able to obtain), which the patient built and where he is a prominent citizen, etc. Through some mischance he has been confused with another man of the same name, a poor Washington negro, who has committed a murder. If his townspeople in Washington, Louisiana, can be notified, the error will be rectified.

So as we see our patient to-day he is entrenched behind four rows of defences which shut out the world of reality effectively and within which he finds life bearable. Around the outer breastworks, so to speak, of his defences, he has constructed a maze of unintelligibility in which we who attempt to penetrate to his psychic secrets find ourselves wandering dazed in a labyrinth of neologisms, irrelevances and digressions. Now and then we catch a glimpse of the world in which the patient lives and then another turn shuts out the view and we find ourselves groping in the dark.

How long this individual would have continued in what Jelliffe<sup>6</sup> calls the "predementia period" it is impossible to say; perhaps he would have entered one of the services, and the rigid requirements of military discipline would have caused the defence reaction of his psychosis. Perhaps there would have been a gradual development of the psychosis without other direct causes than the duties of daily life. But as it was he was suddenly brought face to face with reality in its most insistent aspect, and after a certain amount of refusal to see and to believe, he developed his psychosis which solves for him his problem.

<sup>6</sup> Jelliffe, S. E. "Predementia Præcox." *Journal of Nervous and Mental Disease*, Jan. 1911.

## THE THEORY OF PSYCHOANALYSIS

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*(Continued from page 284)*

### THE ETIOLOGICAL SIGNIFICANCE OF PHANTASY CRITICIZED

The apparent etiological development of neurosis, discovered by psychoanalysis, is in reality only the work of causally connected phantasies, which the patient has created from that libido which at times he did not employ in the biological adaptation. Thus, these apparently etiological phantasies seem to be forms of compensation, disguises, for an unfulfilled adaptation to reality. The vicious circle previously mentioned between the withdrawing in the face of difficulties and the regression into the world of phantasies, is naturally well-suited to give the illusion of an apparent striking causal relationship, so that both the patient and the physician believe in it. In such a development accidental experiences are only "extenuating circumstances." I feel I must make allowance for those critics who, on reading the history of psychoanalytic patients, get the impression of phantastic elaboration. Only they make the mistake of attributing the phantastic artefacts and far-fetched arbitrary symbolism to the suggestion and to the awful phantasy of the physician, instead of to the unequalled fertility of phantasy on the part of the patient. Of a truth, there is a good deal of artificial elaboration in the phantasies of a psychoanalytic case. There are generally significant signs of the patient's active imagination. The critics are not so wrong when they say that their neurotic patients have no such phantasies. I have no doubt that patients are unconscious of the greater part of their own phantasies. A phantasy only "really" exists in the unconscious, when it has some notable effect upon the conscious, *e. g.*, in the form of a dream; otherwise,



we may say with a clear conscience that it is not real. Every one who overlooks the frequently nearly imperceptible effects of unconscious phantasies upon the conscious, or renounces the fundamental, and technically incontestable analysis of dreams, can easily overlook the phantasies of his patients altogether. We are, therefore, inclined to smile when we hear this repeated objection. But we must admit that there is some truth in it. The regressive tendency of the patient is strengthened by the attention bestowed on it, and directed to the unconscious, that is to say, to the phantasies he discovers and forms during analysis. We might even perhaps go so far as to say that, during the time of analysis, this phantasy-production is greatly increased, as the patient is strengthened in his regressive tendency, by the interest taken by the physician and originates even more phantasies than he did before. Hence, our critics have repeatedly stated that a conscientious therapy of the neurosis should go in exactly the opposite direction to that taken by psychoanalysis; in other words, it has been the chief endeavor of therapy, hitherto, to extricate the patient from his unhealthy phantasies and bring him back again to real life.

## CHAPTER IX

### THE THERAPEUTICAL PRINCIPLES OF PSYCHOANALYSIS

While the psychoanalyst, of course, knows of this therapeutic tendency to extricate the patient from his unhealthy phantasies, he also knows just how far this mere extricating of neurotic patients from their phantasies goes. As physicians, we should never think of preferring a difficult and complicated method, assailed by all authorities, to a simple, clear and easy one without good reason. I am perfectly well-acquainted with hypnotic suggestion, and with Dubois' method of persuasion, but I do not use these methods, on account of their relative inadequacy. For the same reason, I do not use the direct "*ré-éducation de la volonté*" as the psychoanalytic method gives me better results.

In applying psychoanalysis we must grant the regressive phantasies of the patient, for psychoanalysis has a much broader outlook, as regards the valuation of symptoms, than have the above psychotherapeutic methods. These all emanate from the assertion that a neurosis is an absolute morbid formation.

The reigning school of neurology has never thought of considering neurosis as a healing process also, and of attributing to the neurotic formations a quite special teleological meaning. Neurosis, like every other disease, is a compromise between the morbid tendencies, and the normal function. Modern medicine no longer considers fever as the illness itself, but a purposeful reaction of the organism. Psychoanalysis, likewise, no longer conceives a neurosis as *eo ipso* morbid, but as also having a meaning and a purpose. From this there follows the more reserved and expectant attitude of psychoanalysis towards neurosis. Psychoanalysis does not judge the value of the symptoms, but first tries to understand what tendencies lie beneath these symptoms. If we were able to abolish a neurosis in the same way, for instance, as a cancer is destroyed, then at the same time there would be destroyed a great amount of available energy also. We save this energy, that is, we make it serve the purposes of the instinct for health, as soon as we can trace the meaning of these symptoms; by taking part in the regressive movement of the patient. Those unfamiliar with the essentials of psychoanalysis will have some difficulty in understanding how a therapeutic effect can come to pass when the physician takes part in the pernicious phantasies of the patient. Not only critics, but the patients also, doubt the therapeutic value of such a method, which concentrates attention upon phantasies which the patient rejects as worthless and reprehensible. The patients will often tell you that their former physicians forbade them to occupy themselves with their phantasies, and told them that they must only consider that it is well with them, when they are free, if but momentarily, from their awful torments. So, it seems strange enough that it should be of any use to them, when the treatment brings them back to the very thing from which they have tried constantly to escape. The following answer may be made: all depends upon the position which the patient takes up towards his own phantasies. These phantasies have been hitherto, for the patient, an absolutely passive and involuntary manifestation. As we say, he was lost in his dreams. The patient's so-called brooding is an involuntary kind of dreaming too. What psychoanalysis demands from a patient is only apparently the same. Only a man who has a very superficial knowledge of psychoanalysis can

confuse this passive dreaming with the position taken up in analysis. What psychoanalysis asks from the patient is just the contrary of what the patient has always done. The patient can be compared to a person who, unintentionally, has fallen into the water and sunk, whilst psychoanalysis wants him to dive in, as it was no mere chance which led him to fall in at just that spot. There lies a sunken treasure, and only a diver can raise it.

The patient, judging his phantasies from the standpoint of his reason, regards them as valueless and senseless; but, in reality, the phantasies have their great influence on the patient because they are of great importance. They are old, sunken treasures, which can only be recovered by a diver, that is, the patients, contrary to their wont, must now pay an active attention to their inner life. Where they formerly dreamed, they must now think, consciously and intentionally. This new way of thinking about himself has about as much resemblance to the patient's former mental condition as a diver has to a drowning man. The earlier joy in indulgence has now become a purpose and an aim—that is, has become work. The patient, assisted by the physician, occupies himself with his phantasies, not to lose himself therein, but to uproot them, piece by piece, and to bring them into daylight. He thus reaches an objective standpoint towards his inner life, and everything he formerly loathed and feared is now considered consciously. This contains the basis of the whole psychoanalytic therapy. In consequence of his illness, the patient stood, partially or totally, outside of real life. Consequently he neglected many of his life's duties, either in regard to social work or to the ordinary daily tasks. If he wishes to be well, he must return to the fulfilment of his particular obligations. Let me say, by way of caution, that we are not to understand by such "duties," some general ethical postulates, but duties towards himself. Nor does this mean that they are *eo ipso* egoistic interests, since we are social beings as well, a matter too easily forgotten by individualists. An ordinary person will feel very much more comfortable sharing a common virtue than possessing an individual vice, even if the latter is a very seductive one. They must be already neurotic, or otherwise extraordinary people who can be deluded by such particular interests. The neurotic fled from his duties and his libido withdrew, at least partly, from the



tasks imposed by real life. In consequence, the libido became introverted and directed towards an inner life. The libido followed the path of regression: to a large extent phantasies replaced reality, because the patient refused to overcome certain real difficulties. Unconsciously the neurotic patient prefers—and very often consciously too—his dreams and phantasies to reality. To bring him back to real life and to the fulfilment of its necessary duties, the analysis proceeds along the same false path of regression which has been taken by his libido; so that the beginning of psychoanalysis looks as if it were supporting the morbid tendencies of the patient. But psychoanalysis follows these phantasies, these wrong paths, in order to restore the libido, which is the valuable part of the phantasies, to the conscious self and to the duties of the moment. This can only be done by bringing the phantasies into the light of day, and along with them the libido bound up with them. We might leave these unconscious phantasies to their shadowy existence, if no libido were attached to them. It is unavoidable that the patient, feeling himself at the beginning of analysis confirmed in his regressive tendencies, leads his analytical interest, amid increasing resistances, down to the depths of the shadowy world. We can easily understand that any physician who is a normal person experiences the greatest resistance towards the thoroughly morbid, regressive tendency of the patient, since he feels quite certain that this tendency is pathological. And this all the more because, as physician, he believes he is right in refusing to give heed to his patient's phantasies. It is quite conceivable that the physician feels a repulsion towards this tendency; it is undoubtedly repugnant to see how a person is completely given up to such phantasies, finding only himself of any importance and never ceasing to admire or despise himself. The esthetic sense of normal people has, as a rule, little pleasure in neurotic phantasies, even if it does not find them absolutely repulsive. The psychoanalyst must put aside such esthetic judgment, just as every physician must, who really tries to help his patients. He may not fear any dirty work. Of course there are a great many patients physically ill, who, without undergoing an exact examination or local treatment, do recover by the use of general physical, dietetic, or suggestive means. Severe cases can, however, only be helped by a more exact examination and

therapy, based on a profound knowledge of the illness. Our psychotherapeutic methods hitherto have been like these general measures. In slight cases they did no harm; on the contrary, they were often of great service. But for a great many patients these measures have proved inadequate. If they really can be helped, it will be by psychoanalysis, which is not to say that psychoanalysis is a universal panacea. Such a sneer proceeds only from ill-natured criticism. We know very well that psychoanalysis fails in many cases. As everybody knows, we shall never be able to cure all illnesses.

This "diving" work of analysis brings dirty matter piecemeal out of the slime, which must then be cleansed before we can tell its value. The dirty phantasies are valueless and are thrown aside, but the libido actuating them is of value and this, after cleansing, becomes serviceable again. To the psychoanalyst, as to every specialist, it will sometimes seem that the phantasies have also a value of their own, and not only by reason of the libido linked with them. But their value is not, in the first instance, for the patient. For the physician, these phantasies have a scientific value, just as it is of special interest to the surgeon to know whether the pus contained staphylococci or streptococci. To the patient it is all the same, and for him, it is better that the doctor conceal his scientific interest, in order not to tempt him to have greater pleasure than necessary in his phantasies. The etiological importance which is attached to these phantasies, incorrectly, to my mind, explains why so much room is given up in psychoanalytic literature to the extensive discussion of the various sexual phantasies. Once it is known that absolutely nothing is impossible in the sphere of sexual phantasy, the former estimate of these phantasies will disappear, and therewith the endeavor to discover in them an etiological import. Nor will the most extended discussion of these cases ever be able to exhaust this sphere.

Every case is theoretically inexhaustible. But in general the production of phantasies ceases after a time. Naturally, we must not conclude from this that the possibility of creating phantasies is exhausted, but the cessation in their production only means that there is then no more libido on the path of regression. The end of the regressive movement is reached as soon as the libido

takes hold of the present real duties of life, and is used to solve those problems. But there are cases, and these not a few, where the patient continues longer than usual to produce endless phantastic manifestations, either from his own pleasure in them or from certain false expectations on the part of the doctor. Such a mistake is especially easy for beginners, since, blinded by the present psychoanalytical discussion, they keep their interest fixed on these phantasies, because they seem to possess etiological significance. They are therefore constantly at pains to fish up phantasies of early childhood, vainly hoping to find thus the solution of the neurotic difficulties. They do not see that the solution lies in action, and in the fulfilment of certain necessary duties of life. It will be objected that the neurosis is entirely due to the incapacity of the patient to carry out these very demands of life, and that therapy by the analysis of the unconscious ought to enable him to do so, or at least, give him means to do so. The objection put in this way is perfectly valid, but we have to add that it is only so when the patient is really conscious of the duties he has to fulfil, not only academically, in their general theoretical outlines but in their most minute details. It is characteristic for neurotic people to be wanting in this knowledge, although, because of their intelligence, they are well aware of the general duties of life, and struggle, perhaps only too hard, to fulfil the prescriptions of current morality. But the much more important duties which he ought to fulfil towards himself are to a great extent unknown to the neurotic; sometimes even they are not known at all. It is not enough, therefore, to follow the patient blindfold on the path of regression, and to push him by an inopportune etiological interest back into his infantile phantasies. I have often heard from patients, with whom the psychoanalytic treatment has come to a standstill: "The doctor believes I must have somewhere some infantile trauma, or an infantile phantasy which I am still repressing." Apart from the cases where this supposition was really true, I have seen cases in which the stoppage was caused by the fact that the libido, hauled up by the analysis, sank back into the depths again for want of employment. This was due to the physician's attention being directed entirely to the infantile phantasies, and his failing therefore to see what duties of the moment the patient had to fulfil. The consequence was that the libido



brought forth by analysis always sank back again, as no opportunity for further activity was found.

There are many patients who, on their own account, discover their life-tasks and abandon the production of regressive phantasies pretty soon, because they prefer to live in reality, rather than in their phantasies. It is a pity that this cannot be said of all patients. A good many of them forsake for a long time, or even forever, the fulfilment of their life-tasks, and prefer their idle neurotic dreaming. I must again emphasize that we do not understand by "dreaming" always a conscious phenomenon.

In accordance with these facts and these views, the character of psychoanalysis has changed during the course of time. If the first stage of psychoanalysis was perhaps a kind of surgery, which would remove from the mind of the patient the foreign body, the "blocked" affect, the later form has been a kind of historical method, which tries to investigate carefully the genesis of the neurosis, down to its smallest details, and to reduce it to its earliest origins.

#### THE CONCEPTION OF TRANSFERENCE

This last method has unmistakably been due to strong scientific interest, the traces of which are clearly seen in the delineations of cases so far. Thanks to this, Freud was also able to discover wherein lay the therapeutical effect of psychoanalysis. Whilst formerly this was sought in the discharge of the traumatic affect, it was now seen that the phantasies produced were especially associated with the personality of the physician. Freud calls this process *transference* ("Uebertragung"), owing to the fact that the images of the parents ("imagines") are henceforth transferred to the physician, along with the infantile attitude of mind adopted towards the parents. The transference does not arise solely in the intellectual sphere, but the libido bound up with the phantasy is transferred, together with the phantasy itself, to the personality of the physician, so that the physician replaces the parents to a certain extent. All the apparently sexual phantasies which have been connected with the parents are now connected with the physician, and the less this is realized by the patient, the more he will be unconsciously bound to his physician. This recognition is in many ways of prime importance.

This process has an important biological value for the patient. The less libido he gives to reality, the more exaggerated will be his phantasies, and the more he will be cut off from the world. Typical of neurotic people is their attitude of disharmony towards reality, that is, their diminished capacity for adaptation. Through the transference to the physician, a bridge is built, across which the patient can get away from his family, into reality. In other words, he can emerge from his infantile environment into the world of grown-up people, for here the physician stands for a part of the extra-familial world. But on the other hand, this transference is a powerful hindrance to the progress of treatment, for the patient assimilates the personality of the physician as if he did stand for father or mother, and not for a part of the extra-familial world. If the patient could acquire the image of the physician as a part of the non-infantile world, he would gain a considerable advantage. But transference has the opposite effect; hence the whole advantage of the new acquisition is neutralized. The more the patient succeeds in regarding his doctor as he does any other individual, the more he is able to consider himself objectively, the greater becomes the advantage of transference. The less he is able to consider his doctor in this way, the more the physician is assimilated with the father, the less is the advantage of the transference and the greater will be its harm. The familial environment of the patient has only become increased by an additional personality assimilated to his parents. The patient himself is, as before, still in his childish surroundings, and therefore maintains his infantile attitude of mind. In this manner, all the advantages of transference can be lost.

There are patients who follow the analysis with the greatest interest without making the slightest improvement, remaining extraordinarily productive in phantasies, although the whole development of their neurosis, even to the smallest details, has been brought to light. A physician under the influence of the historical view might be thus easily thrown into confusion, and would have to ask himself: What is there in this case still to be analyzed? Those are just the cases of which I spoke before, where it is no longer a matter of the analysis of the historical material, but we have now to face a practical problem, the overcoming of the inadequate infantile attitude of mind. Of course,

the historical analysis would show repeatedly that the patient had a childish attitude towards his physician, but it would not bring us any solution of the question how that attitude could be changed. To a certain extent, this serious disadvantage of transference is found in every case. Gradually it has been proved that this part of psychoanalysis is, considered from a scientific standpoint, extraordinarily interesting and of great value, but in its practical aspect, of less importance than that which has now to follow, namely, the *analysis of the transference*.

#### CONFESSION AND PSYCHOANALYSIS

Before we enter into a more detailed consideration of this practical part of psychoanalysis, I should like to mention a parallelism between the first part of psychoanalysis and a historical institution of our civilization. It is not difficult to guess this parallelism. We find it in the religious institution called *confession*. By nothing are people more cut off from fellowship with others than by a secret borne about within them. It is not that a secret actually cuts off a person from communicating with his fellows, yet somehow personal secrets which are zealously guarded do have this effect. "Sinful" deeds and thoughts, for instance, are the secrets which separate one person from another. Great relief is therefore gained by confessing them. This relief is due to the re-admission of the individual to the community. His loneliness, which was so difficult to bear, ceases. Herein lies the essential value of the confession. But this confession means at the same time, through the phenomenon of transference and its unconscious phantasies, that the individual becomes tied to his confessor. This was probably instinctively intended by the Church. The fact that perhaps the greater part of humanity wants to be guided, justifies the moral value attributed to this institution by the Church. The priest is furnished with all the attributes of paternal authority, and upon him rests the obligation to guide his congregation, just as a father guides his children. Thus the priest replaces the parents and to a certain extent frees his people from their infantile bonds. In so far as the priest is a highly moral personality, with a nobility of soul, and an adequate culture, this institution may be commended as a splendid instance of social control and education, which served humanity during



the space of two thousand years. So long as the Christian Church of the Middle Ages was capable of being the guardian of culture and science, in which rôle her success was, in part, due to her wide toleration of the secular element, confession was an admirable method for the education of the people. But confession lost its greatest value, at least for the more educated, as soon as the Church was unable to maintain her leadership over the more emancipated portion of the community and became incapable, through her rigidity, of following the intellectual life of the nations.

The more highly educated men of to-day do not want to be guided by a belief or a rigid dogma; they want to understand. Therefore, they put aside everything that they do not understand, and the religious symbol is very little accessible for general understanding. The *sacrificium intellectus* is an act of violence, to which the moral conscience of the highly developed man is opposed. But in a large number of cases, transference to, and dependence upon the analyst could be considered as a sufficient end, with a definite therapeutic effect, if the analyst were in every respect a great personality, capable and competent to guide the patients given into his charge and to be a father of his people. But a modern, mentally-developed person desires to guide himself, and to stand on his own feet. He wants to take the helm in his own hands; the steering has too long been done by others. He wants to understand; in other words, he wants to be a grown-up person. It is much easier to be guided, but this no longer suits the well-educated of the present time, for they feel the necessity of the moral independence demanded by the spirit of our time. *Modern humanity demands moral autonomy.* Psychoanalysis has to allow this claim, and refuses to guide and to advise. The psychoanalytic physician knows his own shortcomings too well, and therefore cannot believe that he can be father and leader. His highest ambition must only consist in educating his patients to become independent personalities, and in freeing them from their unconscious dependency within infantile limitations. Psychoanalysis has therefore to analyze the transference, a task left untouched by the priest. In so doing, the unconscious dependence upon the physician is cut off, and the patient is put upon his own feet; this at least is the end at which the physician aims.

## THE ANALYSIS OF THE TRANSFERENCE

We have already seen that the transference brings about difficulties, because the personality of the physician is assimilated with the image of the patient's parents. The first part of the analysis, the investigation of the patient's complexes, is rather easy, chiefly because a man is relieved by ridding himself of his secrets, difficulties and pains. In the second place, he experiences a peculiar satisfaction from at last finding some one who shows interest in all those things to which nobody hitherto would listen. It is very agreeable to find a person, who tries to understand him, and does not shrink back. In the third place, the expressed intention of the physician, to understand him and to follow him through all his erring ways, pathetically affects the patient. The feeling of being understood is especially sweet to the solitary souls who are forever longing for "understanding." In this they are insatiable. The beginning of the analysis is for these reasons fairly easy and simple. The improvement so easily gained, and the sometimes striking change in the patient's condition of health are a great temptation to the psychoanalytic beginner to slip into a therapeutic optimism and an analytical superficiality, neither of which would correspond to the seriousness and the difficulties of the situation. The trumpeting of therapeutic successes is nowhere more contemptible than in psychoanalysis, for no one is better able to understand than a psychoanalyst how the so-called result of the therapy depends on the coöperation of nature and the patient himself. The psychoanalyst may rest content with possessing an advanced scientific insight. The prevailing psychoanalytic literature cannot be spared reproach that some of its works do give a false impression as to its real nature. There are therapeutical publications from which the uninitiated receive the impression that psychoanalysis is more or less a clever trick, with astonishing effects. The first part of analysis, where we try to understand, and which, as we have seen before, offers much relief to the patient's feelings, is responsible for these illusions. These incidental benefits help the phenomenon of transference. The patient has long felt the need of help to free him from his inward isolation and his lack of self-understanding. So he gives way to his transference, after first struggling against it. For a neurotic person, the transference is an ideal situation. He him-

self makes no effort, and nevertheless another person meets him halfway, with an apparent affectionate understanding; does not even get annoyed or leave off his patient endeavors, although he himself is sometimes stubborn and makes childish resistances. By this means the strongest resistances are melted away, for the interest of the physician meets the need of a better adaptation to extra-familial reality. The patient obtains, through the transference, not only his parents, who used to bestow great attention upon him, but in addition he gets a relationship outside the family, and thus fulfils a necessary duty of life. The therapeutical success so often to be seen at the same time fortifies the patient's belief that this new-gained situation is an excellent one. Here we can easily understand that the patient is not in the least inclined to abandon this newly-found advantage. If it depended upon him, he would be forever associated with his physician. In consequence, he begins to produce all kinds of phantasies, in order to find possible ways of maintaining the association with his physician. He makes the greatest resistances towards his physician, when the latter tries to dissolve the transference. At the same time, we must not forget that for our patients the acquisition of a relationship outside the family is one of the most important duties of life, and one, moreover, which up to this moment they had failed or but very imperfectly succeeded in accomplishing. I must oppose myself energetically to the view that we always mean by this relationship outside the family, a sexual relation in its popular sense. This is the misunderstanding fallen into by so many neurotic people, who believe that a right attitude toward reality is only to be found by way of concrete sexuality. There are even physicians, not psychoanalysts, who are of the same conviction. But this is the primitive adaptation which we find among uncivilized people under primitive conditions. If we lend uncritical support to this tendency of neurotic people to adapt themselves in an infantile way, we just encourage them in the infantilism from which they are suffering. The neurotic patient has to learn that higher adaptation which is demanded by life from civilized and grown-up people. Whoever has a tendency to sink lower, will proceed to do so; for this end he does not need psychoanalysis. But we must be careful not to fall into the opposite extreme and believe that we can create by analysis great person-



alities. Psychoanalysis stands above traditional morality. It follows no arbitrary moral standard. It is only a means to bring to light the individual trends, and to develop and harmonize them as perfectly as possible.

Analysis must be a biological method, that is, a method which tries to connect the highest subjective well-being with the most valuable biological activity. The best result for a person who passes through analysis, is that he becomes at the end what he really is, in harmony with himself, neither bad nor good, but an ordinary human being. Psychoanalysis cannot be considered a method of education, if by education is understood the possibility of shaping a tree to a highly artificial form. But whoever has the higher conception of education will most prize that educational method which can cultivate a tree so that it shall fulfil to perfection its own natural conditions of growth. We yield too much to the ridiculous fear that we are at bottom quite impossible beings, and that if everyone were to appear as he really is a dreadful social catastrophe would result. The individualistic thinkers of our day insist on understanding by "people as they really are," only the discontented, anarchistic and egotistic element in humanity; they quite forget that this same humanity has created those well-established forms of our civilization which possess greater strength and solidity than all the anarchistic under-currents.

When we try to dissolve the transference we have to fight against powers which have not only neurotic value, but also universal normal significance. When we try to bring the patient to the dissolution of his transference, we are asking more from him than is generally asked of the average man; we ask that he should subdue himself wholly. Only certain religions have made such a claim on humanity, and it is this demand which makes the second part of analysis so difficult.

The technique that we have to employ for the analysis of the transference is exactly the same as that before described. Naturally the problem as to what the patient must do with the libido which is now withdrawn from the physician comes to the fore. Here again, there is great danger for the beginner, as he will be inclined to suggest, or to give suggestive advice. This would be extremely pleasant for the patient in every respect, and therefore fatal.

## THE PROBLEM OF SELF-ANALYSIS

I think here is the place to say something about the indispensable conditions of the psychology of the psychoanalyst himself. Psychoanalysis is by no means an instrument applied to the patient only; it is self-evident that it must be applied to the psychoanalyst first. I believe that it is not only a moral, but a professional duty also, for the physician to submit himself to the psychoanalytic process, in order to clean his mind from his own unconscious interferences. Even if he is entitled to trust to his own personal honesty, that will not suffice to save him from the misleading influences of his own unconscious. *The unconscious is unknown, even to the most frank and honest person.* Without analysis the physician will inevitably be blindfolded in all those places where he meets his own complexes; this is a situation of dangerous importance in the analysis of transference. Do not forget that the complexes of a neurotic are only the complexes of all human beings, the psychoanalyst included. Through the interference of your own hidden wishes you will do the greatest harm to your patients. The psychoanalyst must never forget that *the final aim of psychoanalysis is the personal freedom and moral independence of the patient.*

## THE ANALYSIS OF DREAMS

Here, as everywhere in analysis, we have to follow the patient along the line of his own impulses, even if the path seems to be a wrong one. Error is just as important a condition of mental progress as truth. In this second step of analysis, with all its hidden precipices and sand-banks, we owe a great deal to *dreams*. At the beginning of analysis dreams chiefly helped in discovering phantasies; here they guide us, in a most valuable way, to the application of the libido. Freud's work laid the foundation of an immense increase in our knowledge in regard to the interpretation of the dream's content, through its historical material and its tendency to express wishes. He showed us how dreams open the way to the acquisition of unconscious material. In accordance with his genius for the purely historical method, he apprises us chiefly of the analytical relations. Although this method is incontestably of the greatest importance, we ought not to take up

this standpoint exclusively, as such an historical conception does not sufficiently take account of the *teleological meaning of dreams*.

Conscious thinking would be quite insufficiently characterized, if we considered it only from its historical determinants. For its complete valuation, we have unquestionably to consider its teleological or prospective meaning as well. If we pursued the history of the English Parliament back to its first origin, we should certainly arrive at a perfect understanding of its development, and the determination of its present form. But we should know nothing about its prospective function, that is, about the work which it has to accomplish now, and in the future. The same thing is to be said about dreams. Their prospective function has been valued only by superstitious peoples and times, but probably there is much truth in their view. Not that we pretend that dreams have any prophetic foreboding, but we suggest, that there might be a possibility of discovering in their unconscious material those future combinations which are subliminal just because they have not reached the distinctiveness or the intensity which consciousness requires. Here I am thinking of those indistinct presentments of the future which we sometimes have, which are nothing else than subliminal combinations, the objective value of which we are not able to apperceive. The future tendencies of the patient are elaborated by this indirect analysis, and, if this work is successful, the convalescent passes out of treatment and out of his half-infantile state of transference into life, which has been inwardly carefully prepared for, which has been chosen by himself, and to which, after many deliberations, he has at last made up his mind.

(To be continued)



# THE RÔLE OF HOMOSEXUALITY IN THE GENESIS OF PARANOID CONDITIONS

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Freud, in 1895, was the first to call attention to the rôle of homosexuality in paranoia. His writing at this time consisted of the psychoanalysis of a few cases of paranoia. His first work defining his views of sexuality was given to the psychiatric world in his "Studies in Hysteria."<sup>1</sup> During the following eighteen years, however, his own views underwent many changes and modifications. His first conception of the rôle of sexuality, in abnormal conditions, was expressed in regard to the place of sexuality in the etiology of the psychoneuroses.<sup>2</sup> Later his writings have dealt with its rôle in the etiology of the psychoses. His many observations among the different psychoses led to his final statement that homosexuality held a very important position as an etiological factor in paranoia. His close observations finally led him to believe that the basis of all paranoid conditions was an existing homosexuality, and to explain the symptoms to be observed in these conditions as resulting from attempts to repress such homosexual ideas. His explanation of these mechanisms is given in his recent publication "Psychoanalytic Remarks on an Autobiographically Described Case of Paranoia."<sup>3</sup>

In this psychoanalysis of the well-known case of Dr. Jur. David Paul Schreber, as autobiographically described, Freud is able to trace all symptoms to homosexual impulses, which the ego, finding incompatible with itself, attempted to repress. His explanation of these mechanisms is presented in compact form by Payne<sup>4</sup> in a recent article in the *PSYCHOANALYTIC REVIEW*. They are as follows, in brief resumé: The struggle with the homosexual impulse leads to a substitution for the unbearable

idea of an assimilable one in four different ways: I., Delusions of persecution may be formed. Thus the unbearable idea "I love the man" is substituted by the assimilable one "I do not love him; I hate him." This, by projection, becomes "He hates me." II., Erotomania may become a substitute by the following mechanism: The idea, "I love him," becomes replaced by the bearable one, "I do not love him I love her." This, by projection, becomes, "She loves me." III., Jealousy may be the replacing substitute. Thus, "I love him," is replaced by "I do not love him." This, by projection, becomes "She loves him." IV., Grandiose ideas may become the substitute, as "I love him," is substituted by "I do not love him; I love myself." This, by projection, becomes "Everyone else loves me." This, by logical reasoning, leads to the idea, "I am the only one worthy of my love," therefore must be a very superior individual.

Freud's views are the result of his accurately scientific analyses and observations, and have not only been supported, but plainly demonstrated by his work. In addition to his work many other writers have shown that homosexuality is the determining factor in the etiology of paranoid conditions, among these Ferenczi,<sup>5</sup> Bleuler,<sup>6</sup> and Mæder. This theory, that homosexuality is the determining factor in producing these conditions, may in fact be regarded as proven, as it has been observed by so many writers.

Little seems to have been said, however, of those minor conditions, which, while not of sufficient intensity to be classed as paranoid states, still give the individual what might be called a paranoid character, and after slight failure of the individual to adjust himself to his surroundings might be considered as paranoid precox, but which, however, fail to end in any noticeable degree of deterioration. These conditions can also be shown to result from homosexual inclinations in which there is a failure of suppression and in which the conflict between the ego and the unbearable thought results in the use of the first mentioned mechanism. Thus the individual becomes attracted towards the persons whom he imagines to be persecuting him. For the idea "I love the man" he replaces "I do not love him; I hate him," and then projects this idea into the external world as, "He hates

me." In many cases this mechanism can be plainly seen: An excellent example follows:

X, a white male, aged thirty-five, came under the writer's observation while being treated, in conjunction with a well-known alienist and neurologist, for a monoplegia. This man was a member of a family prominent both socially and intellectually. In this family there were seven male children and one female child. Of these eight children, the sister, slightly younger than the patient, had never married and expressed herself as not caring for men. One brother had been openly homosexual, but later married, and after several years of married life stated that while since his marriage he had not indulged in any homosexual relations, still his attraction towards the male was very great. Another brother, aged thirty-three, lived openly in a club, which had the reputation of being a society given to homosexual practices. Two brothers had committed suicide early in life. Two other brothers were leading apparently normal lives.

X learned to walk and talk at the usual age and started to school at the age of six. He continued in the public school until finishing high school, after which he attended a military academy for one year. During his entire school work he was considered unusually bright, in fact he always did better work than any one else in his classes. His tastes were markedly toward the artistic, both in music and drawing. He became an excellent pianist, but his principal taste was for drawing, which art he cultivated until he was able to do excellent work. At about the time he finished high school his father died and he was obliged to give up his idea of studying drawing in Paris. He took advantage of the first opportunity which presented itself for making a livelihood, which happened to be a clerkship in a local bank. He began to like this sort of work, succeeded well, and gained rapid promotion. He became attracted toward a woman somewhat his senior and married her, expecting to find a passionate enjoyment in his conjugal relations. He was greatly disappointed, however, in not finding the happiness in which he expected to live.

He soon became despondent and had many suicidal ideas. He stated that he imagined his wife tried only to hurt him and that he soon began to think his friends were acting peculiarly toward him. One night, shortly after this, a clergyman of considerable



prominence was obliged to remain over night at his home. At the time there were a number of other guests in the house and as a result this clergyman was obliged to sleep with X. During the night he attempted to hold perverted relations with X, and he being thus seduced found that this unexpected experience replaced the happiness he had expected to find with his wife. This clergyman gave him much information concerning the lives of homosexual individuals. After this X gave himself up to many relations with males. His interest in life returned and the depression rapidly gave place to contentment, which enabled him to progress rapidly with his work. At numerous times he became possessed with the idea that these relations were unethical and attempted to repress his inclinations. Each time, however, this led to another attack of these paranoid ideas that every one was watching him and talking about him. No hallucinations were ever present, but whenever people were behind him talking he felt certain they were talking about him, and when some one would look at him a little too long, as he thought, he would feel sure that this person was thinking something derogatory to his character. This became evident even to his mind untrained in psychology, to be present only when he attempted to repress his homosexual inclinations. He stated that he had grown so used to this condition that whenever he began to have these ideas of persecution he immediately sought out his particular type of sexual experience and they soon disappeared.

There was absolutely no deterioration of intellect present in this man, a quiet well-dressed man of rather youthful and absolutely masculine appearance, and able to talk in a decidedly intelligent manner on any ordinary topic of conversation. No one could find any evidence of a psychosis present, nor would one have considered him in any way effeminate, although he found sexual gratification only in the feminine rôle in fellatio. This man stated that he knew of several of his acquaintances who had similar experiences in that they had observed that when they attempted abstinence from homosexual intercourse they seemed to become out of harmony with their surroundings and imagined that every one tried to hurt them in one way or another.

One incident which occurred during my observation of X is of interest to show the use of this mechanism. X had for some

time been able to refrain from sexual gratification with no symptoms of paranoid ideas being present. At this time he met Y, a young man full of strength and vigor and of excellent physical development. He became openly in love with him and succeeded in establishing relations with him. In a short time Y broke off these relations but continued to be as friendly as possible with X. In a very short time X began to believe that Y was talking about him every time he would see him talking to any one else and that he lost no opportunity of annoying him. In reality Y was trying to be friendly with X, who knew this. He would often state, "I know that he does not do these things, yet I can not get these ideas out of my mind." Finally, a few weeks later, X became interested in another person and after establishing sexual relations with this second person the ideas concerning Y soon left him and he again felt friendly toward him. The relation of these ideas to his repressed sexuality was evident even to himself.

There are at present under observation in the Government Hospital for the Insane two patients suffering from dementia precox with paranoid ideas that are parallel to each other. Both are patients from the government service, one from the Army and one from the Navy. Both came with the story of many persecutions during their service by the men with whom they were associated. One upon admission denied that any one had ever connected his name with sexual affairs. He explained his persecutions by the fact that he was a foreigner and that every one was down on foreigners. He felt that he was different from the men around him and thought that they too seemed to know it. He denied any knowledge of such a condition as homosexuality, had been married and had often indulged in heterosexual intercourse. It was somewhat difficult when a psychoanalysis was attempted to enter into the patient's mental condition as that necessary condition of rapport with the examiner was with great difficulty established. The fact, however, was brought out that the patient had never gained any gratification from intercourse. Later it was learned that he wished to be friendly with the men in his company more than anything else. It was suggested that this might be a sexual attraction, which idea was indignantly denied. During the analysis, however, the homo-

sexual element in this desire was plainly brought out. When a physical examination was attempted the patient's sexual excitement was very marked. Later this patient developed the idea that the other patients and attendants on the ward were annoying him in various ways. A short time later he developed the idea that they were all attempting to make him accede to their desire to use him for improper purposes (fellatio).

In this case it is very evident that his feeling of being different from the men about him was due to an unconscious understanding of the difference in his psychic make-up, which was due to his homosexuality. He had never gained satisfaction from heterosexual intercourse and as a result felt without motive in life. His paranoid idea that the others about him were attempting to use him for improper purposes was very plainly a projection of his own desires into the external world.

The other case came with the belief that all the men in his company were accusing him of male love affairs, at the same time stating that he had never been connected with such an affair nor had he ever desired relations with his own sex. The same difficulty was encountered in establishing confidence in the mind of the patient. Analysis, however, finally revealed the fact that the patient had never held intercourse and that he considered the act of intercourse as disgusting and improper. He gave marked reactions to homosexual word associations and presented the same marked excitement when a physical examination was made, after having had an emotional outburst of crying when another physician had attempted to examine him.

These cases are both of only average or possibly somewhat below the average mentality, a fact which precludes the possibility of a very elaborate psychoanalysis. Sufficient, however, was done to demonstrate the homosexual basis of their paranoid ideas.

These few illustrations show somewhat the manner in which this underlying homosexuality manifests itself. In general a review of these mechanisms is as follows: (A) The homosexual inclinations may be open and well understood by the ego, in which case an attempt at suppression, if unsuccessful, leads to a genesis of persecutory ideas which may be either unsystematized or fairly well systematized, thus giving the individual a re-



sulting compensatory reaction manifesting itself anywhere in the gradation from a paranoid character to an actual paranoid state. (B) The homosexuality may be as yet not understood by the ego, in other words, may be unconscious. In these individuals, when the unconscious breaks through into the conscious mentality, the idea may be so unbearable to the ego that the censor distorts the libido present, this distortion taking the form of displacement of the affect, which it does by projecting the affect to the external world. This results in a true paranoia. If of greater range and combined with the mechanism of distortion by means of symbolism and a partial withdrawal of the affect, it produces a dementia precox of the paranoid type.

Many objections to this theory can be raised by those not familiar with the Freudian view of sexuality in its wider range, but when once this is fully comprehended, and it is understood also that the libido manifest in homosexuality is not confined to the actual sensual act, many of these objections disappear. Then too, those who regard sex inversion as merely a transitory condition, easily remedied and curable by suggestion, as notably Schrenk-Notzing<sup>7</sup> and recently Brill,<sup>8</sup> and who have not gone deeper into the mentality of these cases, who when they find themselves able to refrain from homosexual acts and perform what Ellis<sup>9</sup> speaks of as "*masturbatio per vaginam*," regard themselves as cured, would probably consider the rôle of homosexuality in paranoid conditions as a false one. If, however, this is considered from the real Freudian viewpoint its important part in the production of these conditions is readily seen.

The question may be raised, why do not all persons who have homosexual tendencies, which they do not gratify, develop paranoid conditions. There are two reasons for this: First, the sex instinct may be sublimated and not repressed, or the repression may be successful. Sublimated libido, or libido that is successfully repressed, does not produce pathological symptoms. Second, as Freud<sup>10</sup> explains in connection with his study of the psychoneuroses, there must be present primarily an hereditary instability of the mental make-up which corresponds to the hereditary tendencies toward certain somatic pathological conditions, notably that of tuberculosis. This hereditary tendency of itself is insufficient to produce symptoms, but it renders the individual

less capable of withstanding the psychic trauma produced by the conflict between the ego and the unbearable idea, and this trauma, in an individual unfitted to withstand it, is responsible for these psychic disturbances which manifest themselves as paranoid conditions.

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## TECHNIQUE OF PSYCHOANALYSIS

BY SMITH ELY JELLIFFE

(Continued from p. 307)

### THE SOURCES

There is no royal road in psychoanalysis, for every analysis is after all a highly individualized problem. At the same time there are general principles, else a technique could not be evolved. In actual practice a number of different approaches may be utilized, and just as in the royal game of chess there are recognized openings, mid game and end problems, so in psychoanalysis one's method of application of fairly well understood and accredited principles must be carefully chosen with special reference to the character of the case in hand.

Among those of considerable experience it is not infrequent to find marked diversity of opinion regarding the chief factors and the most useful methods to be employed in analysis. The beginner is often overwhelmed with "*ex cathedra*" statements "never do this," and "always do that"; Freud says this and Jung says something else; Adler advises so and so, Ferenczi the opposite. One will say, "I always begin this way," another says, "No, begin this way."

This is to be expected in view of the comparative newness of the present methods, and the highly complicated nature of the material to be studied. The analyst himself should recognize, however, that psychological analysis is by no means new, even if that special brand of it, psychoanalysis, has been given a new name, and is without doubt a more concrete and adequate group of working hypotheses than those heretofore utilized.

The interest taken in the mental life is very old. From the earliest times different aspects have been carefully observed. Of modern students of these Dessoir<sup>12</sup> has given us a very useful sum-

<sup>12</sup> "Outlines of the History of Psychology," Max Dessoir, The Macmillan Co., New York, 1912.



mary. In this summary the development of the religious ideas, of the vital, natural and scientific processes involved, and of the practical and artistic knowledge of human life are termed psychosophy, psychology and psychognosia respectively. These are three view points, three objective modes of approach to the problem of the psychical. In this scheme of things it is clear that psychoanalysis would more clearly be grouped with the third, *i. e.*, with psychognosia.

Early attempts at knowledge of human nature as deposited in maxims and aphorisms are well crystallized in the sayings of the gnostic poets of the tenth to the fourth centuries B. C. The Bible and Greek philosophies contain most of these. Aristotle's studies of the temperaments are full of psychognostic (psychoanalytic) wisdom. From the days of antiquity there are rich collections of autobiographies, tales, lyrics, soliloquies, and day books all having in common the effort of the individual to express himself, to gain self-knowledge. As Dessoir states, schemes of pedagogic moral self-examinations are abundant from the Golden Verses ascribed to Pythagoras of the Pre-Christian era, through Augustine's Confessions (400 A. D.), to those of Rousseau, and the moderns. Even in most recent times the value of such material is most strikingly set forth in Freud's masterly analysis of the Schreber autobiography.<sup>13</sup>

French characterology was a compact mass of rich psychognostic material in which the works of Madame de Guyon, La Chambre, La Rochefaucauld, La Bruyère, and Chamfort stand out as monuments of serious attempts at practical psychology. La Chambre made use of dream, chiromantic and astrological material, and if one will take the trouble to read behind the words it will be seen that he might have been termed a psychoanalyst. Thomasius who used a French version of an early work by Gracian, also a psychognostic of note, as early as 1687, offered the Elector Frederick III the knowledge of the "new invention," by which it is possible "to know what is hidden in the hearts of men, even against their will, from their daily conversation." Thomasius gave a series of rules and regulations by which the characteristics of a man and his conduct might be deduced. Many

<sup>13</sup> See "Freudian Contributions to Paranoia Problem," by C. R. Payne, Vol. I, No. I, PSYCHOANALYTIC REVIEW, p. 77.

of these are matters of lay knowledge to-day. Even as early as 1783 P. H. Moritz started a psychological magazine for psychognostic observations. Its program as sketched by Dessoir is illuminating. It showed the following characteristics: suspension of moral judgment, collection and comparison of facts, special attention to half pathological phenomena which lie outside of the ordinary course of mental life, cultivation of child psychology and the psychology of language.

During the 19th century, however, scientific discussion of psychognostic problems stagnated, and were superseded by the novel, which took possession of all the practical knowledge of human nature. It was gradually forgotten that concrete as well as abstract problems of the human soul were accessible to scientific treatment. The psychoanalytic movement is therefore a revival of these earlier psychognostic attitudes towards the understanding of human conduct.

The beginner in psychoanalysis will get a better perspective towards his own work should he review some of this early psychognostic literature. The many "ipse dixits" of his surroundings will find a better placement in the general scheme of things. Some acquaintance with the general development of the history of philosophic systems<sup>14</sup> will also be of considerable aid in understanding the general scope of his patients' special philosophies of life, while a bird's eye view of the intellectual history of mankind is invaluable.<sup>15</sup>

I am presupposing, all along, that the aspirant for psychoanalytic knowledge is trained in neurology and psychiatry. A working knowledge of the latter is highly essential.

Of the more strictly psychoanalytic literature itself the major part is in German, but a number of the more fundamental studies have been translated, chiefly by American workers. I purpose suggesting some of the more important psychoanalytic papers which the beginner in psychoanalysis should read. It may be

<sup>14</sup> Putnam, "A Plea for the Study of Philosophic Methods in Preparation for Psychoanalytic Work," *Journal of Abnormal Psychology*, Oct.-Nov., 1911, p. 249.

<sup>15</sup> J. H. Robinson's "Outlines of the History of the Intellectual Class in Western Europe," Columbia University, 2d edition, 1914, will prove the best guide available for one's general historical reading along these proposed lines.

emphasized here that patients should *not* read them. The works of Freud stand out as most essential. A complete bibliography (1893-1909) of Freud's contributions to psychoanalysis may be found in the *Jahrbuch für psychoanalytische und psychopathologische Forschungen*, vol. I, p. 546. Some of his shorter papers are collected in his *Sammlung kleiner Schriften*, 1, 2, and 3d series [Deuticke, Vienna]. A translation of some of these is to be found in volume 4 of the *Nervous and Mental Disease Monograph Series*, "Selected Papers on Hysteria and Other Psycho-neuroses" [2d ed.]. Freud's "Three Contributions to the Sexual Theory" (Vol. 7 of the same series in translation) is highly important, also his "Psychopathology of Every Day Life," and his "Interpretation of Dreams." Both of these have been well translated by A. A. Brill (The Macmillan Co., New York). A highly important series of lectures on psychoanalysis given by Freud at Clark University in 1909 is to be found in the *American Journal of Psychology* for 1909, 1910. In a series of monographs entitled "Schriften zur angewandten Seelenkunde" [Deuticke, Vienna], edited by Freud, a number of valuable studies have appeared. Those by Abraham, Rank and Riklin are noticed hereafter. Two volumes on Psychoanalysis, both by pupils of Freud, are in English. They are not systematic presentations but collections of miscellaneous papers, but are of great value to the student. They are by A. A. Brill (W. B. Saunders & Co.) and Ernest Jones (Wm. Wood and Co.). A comprehensive and precise outline of the Freudian postulates is given by Hitschmann in "Freud's Theories of the Neuroses" (Vol. 17, *Nervous and Mental Disease Monograph Series*, in translation by C. R. Payne). This is the most valuable single volume outline of the development of the psychoanalytic hypotheses. In the same series of the *American Journal of Psychology* there are important papers by C. G. Jung and S. Ferenczi, neither of which should be overlooked by the beginner.

One highly valuable general work on methods is that of Oskar Pfister, "Die psychoanalytische Methode" (J. Klinkhardt, Leipzig). This is a work of 500 pages, written by a teacher and minister, and is especially valuable to the beginner. A translation is highly desirable. It contains copious bibliographical references. One other monograph along modified psychoanalytic lines which



is of great value is that of Ludwig Frank, "Affektstörungen" (Julius Springer, Berlin).

The periodical literature bearing on psychoanalysis is very extensive. Fortunately it can be more or less readily followed. In 1909 the *Jahrbuch für psychoanalytische und psychopathologische Forschungen* (bi-annual) (Deuticke, Vienna) was begun by Bleuler and Freud and edited by Jung. In this first volume (p. 546) the chief psychoanalytic literature to 1910 is given. In Vol. II of the *Jahrbuch* (p. 316) Jones gives a complete list of all the available English and American work, some 192 titles, much of which, however, is not strictly analytic. Neiditsch (p. 347) gives a short note on the Russian literature, Assagioli (p. 349) one on the Italian literature, while (p. 356) Jung gives a complete summary of the chief contributions of Swiss authors to 1910. The *Jahrbuch* is now in its fifth volume and contains much lengthy and complete analytical material. Partial abstracts of the early volumes are to be found in the *Journal of Abnormal Psychology*, Volume 6 (1911), p. 246.

The need for a more frequent publication which would present a more ready coordination was met in 1911 by the establishment of the monthly *Zentralblatt für Psychoanalyse*, edited by W. Stekel (Bergmann, Wiesbaden). This contains shorter articles, copious abstracts and literature citations, and was for a time the official organ of the International Society of Psychoanalysts. It is a highly valuable publication for the analyst. For the more general needs of philosophical, historical, ethical and general problems which might receive illumination from the psychoanalytic hypotheses, Freud began the publication of *Imago* in 1912 (Heller, Vienna). It is bi-monthly edited by O. Rank and H. Sachs. Among many stimulating and valuable papers there appear extensive bibliographies (Vol. I, p. 91, Vol. II, pp. 97, 609) of the studies on the application of psychoanalysis to the mental sciences, chiefly on Individual Psychology, Sexual Psychology, Dream Psychology, Occult Psychology, Child Psychology, Pedagogy, Biography, Æsthetics, Mythology, Philology, Religion, and Criminology. These bibliographies are available to the end of 1913.

In January, 1913, the *Internationale Zeitschrift für Aertzliche Psychoanalyse* was founded by Freud with Drs. S. Ferenczi and O. Rank as editors as the official organ of the International Psy-

choanalytic Society (Heller Vienna). It is a bi-monthly and covers the same ground as the *Zentralblatt*, which latter has continued publication. A. Adler and C. Furtmüller founded the *Zeitschrift für individual Psychologie* (Reinhardt, Munich) in 1913 which contains psychoanalytic material. In the *Journal of Abnormal Psychology* (Badger, Boston), founded by Morton Prince, psychoanalytic material will also be found.

The only journal in English is the present PSYCHOANALYTIC REVIEW which aims to be catholic in its tendencies, a faithful mirror of the psychoanalytic movement, and to represent no schisms or schools but a free forum for all. It is now completing its first year.

The *Journal of Nervous and Mental Disease*, and the *Nervous and Mental Disease Monograph Series* have also contributed several psychoanalytic studies. The most important of these in addition to those already mentioned are the translations of Jung's *Psychology of Dementia Præcox*, Bleuler's *Schizophrenic Negativism*, a short but highly suggestive study, Abraham's *Dreams and Myths* and Rank's *Myth of the Birth of the Hero*.

With these sources the beginner will be able to put himself in touch with the current literature on any problem. Special bibliographies will appear in these pages from time to time.

(To be continued)

## CRITICAL DIGEST

### SOME FREUDIAN CONTRIBUTIONS TO THE PARANOIA PROBLEM

BY CHARLES R. PAYNE, 'A.B., M.D.

*(Continued from page 321)*

I have selected from the recent literature two other cases which illustrate and emphasize still further the relationship between homosexuality (or to use Ferenczi's preferable term, "homoeroticism," since psychic tendencies may never have come to open expression) and paranoia. Coming from physicians of entirely different nationalities than Freud and Ferenczi who first called attention to this relationship, these observations would seem to have especial weight in confirming the latter's conclusions. Dr. Wulff who contributes the first case, practices in Odessa, Russia; Dr. Morichau-Beauchant is Professor of Internal Medicine in the University at Poitiers, France.

Since both cases are reported as briefly as is consistent with making the facts intelligible, I shall not try to condense them further but give them in the author's own words.

I. Falsehoods in psychonanalysis<sup>1</sup> (at the same time, a contribution to the psychology of paranoia), by DR. M. WULFF, Odessa, Russia.

May one believe unreservedly every communication, every association of the patient, may not the patient intentionally lead the physician astray, deceiving him with "false associations," fictitious experiences? Many a patient has probably made the attempt; what he can attain by so doing, the following example may show:

The dream of one of my patients ran as follows: "In my place in the office, two new officials have been engaged and I was told that I was discharged." The analysis immediately came upon resistance. To the first sentence: "In my place in the office, two new officials have been engaged" no associations would come to the patient. Now ensued the following dialogue:

<sup>1</sup>Die Lüge in der Psychoanalyse. (Zugleich ein Beitrag zur Psychologie der Paranoia.) Zentralblatt für Psychoanalyse, Vol. II, No. 3, Dec., 1911.



I: "In your place two have been engaged—does that not mean that your work in the office would require two?"

Patient (hesitating): "No....Yes....I have sometimes thought that I had to work for two."

I: "Who are these two?"

Patient (pause): "Mr. Nathansohn and Mr. Jachimowitsch."

I: "Who are these gentlemen?"

Patient: "I do not know them."

I: "Probably you work with these men in the office?"

Patient: "No....There are no gentlemen with such names in the office. I have made up those names, in reality, I meant the gentlemen X and Y."

The analysis of these two fictitious names disclosed the following: To "Nathansohn" the patient associated a Mr. Nathansohn who often came into the office because of business affairs. "I have the suspicion" says the patient, "that the chief has spoken with him concerning me, that I am so 'abnormal' for my years." That is a paranoid thought and is related to the following idea of the patient: He is thirty-one years old and has never had sexual intercourse, wherefore, he considers himself "abnormal" and believes himself derided and laughed at by all on account of this "abnormality."<sup>2</sup> His chief certainly has no suspicion of this "abnormality" and the same is true of the Mr. Nathansohn who does not know him at all. Now, the further associations of the patient: "The name Nathansohn was also familiar to me earlier....I think that he studied at the same school with my brother; or no....they have merely been associated together somewhere....no....now I know....some weeks ago I attended a masked ball with my brother; this gentleman was also present. He and my brother spoke to the same masked ladies, danced with them and paid them court. The ladies told my brother of Mr. Nathansohn, and Mr. Nathansohn of my brother." The Mr. Nathansohn and the brother were thus identified: they are both aggressively heterosexual, are successful with ladies; the patient, on the other hand, is very shy and anxious in the society of ladies and envies his brother. That has always been so since childhood. Memories of the patient's "first love" at the age of five or six years

<sup>2</sup> Six years before, the patient went through an acute hallucinatory psychosis, at which time he had many ideas of persecution and even now displays many plain paranoid traits.

come to the surface. They concern a four-year-old girl belonging to a neighbor's family, who, however, preferred the brother who was two years older than the patient. The experience led then by transference from the brother upon the father to incestuous love for the mother and to the "family romance."

The other fictitious name is "Jachimowitsch." "That, I am myself," says the patient. "Ja"—"chimowitsch," "Ja" in Russian means "I," "chimowitsch," "imowitsch," a name suffix.

Thus the two, for whom he had to work, are he himself and his brother. He thought he also had to work for his brother in the latter's student days. He had to help his father materially at that time. He had a poorly paid position in a shop with people who, as he thought, were materially helpful to his brother who was studying in the university at that time; for this reason, he thought he had to keep his position in order "to pay for his brother by his work." The brother himself, however, has always besought him to seek another position. Further, the little sum which he has paid his mother for his pension, he considers "a material help" for the father which he had to give instead of his brother, for according to his idea, it was the elder brother and not he, the younger, who should help the father. In this way, he had made his brother his debtor and considered himself as the injured one, the sacrifice. The psychological motivation of this improbable, almost delusional thought is readily understandable. The brother has really taken away from him something dear—his first, childish, solitary, long-ago love, the neighbor's girl. With him there has come about a displacement of the infantile erotic emotions upon material complexes. This displacement, I have very often found more or less outspoken in neurotics: in the struggle for money, the same emotions and affects play as in earliest childhood over the first object of love.

The patient is tormented by the thought, he may not have his work ready in the office, is good for nothing, knows and understands nothing, is mentally little developed, is therefore despised and ridiculed by all. From day to day he expects censure, he will be dismissed from his position in the office with a scandal, thinks he should rather voluntarily give up his position, etc. One of his most important motives for being ill is the wish to be dismissed from the office ("and they told me I was dismissed" in

the dream), to be supported by his brother, and in this way to compel the brother to pay "his debt." Then, he will continue his education in the high school in order to be like his brother in this particular.

The case affords at the same time an insight into the psychology of the paranoid ideas of the patient. The "Nathansohn" is suspected in true paranoid fashion of having laughed at the patient because of his sexual incompetency and to have injured him in his chief's estimation. The analysis discloses that the Nathansohn is identified with his own brother. Similar paranoid thoughts and ideas of reference the patient has in great number, but it is only *men* who laugh at him, despise or persecute him in any manner whatever because of his sexual incompetency, his backwardness in the life struggle, awkwardness, his inferiority in every relation. The analysis discloses, however, behind all the enemies and persecutors of the patient, always the brother or the father. "I am anxious in the presence of men and hate them" said the patient, "and with women, I am always sympathetic and pity them although I am ashamed in their presence." This passive masochistic homosexual anxiety is projected outward from consciousness upon the men and conceived as persecution. These emotions have been very strongly developed in the patient since earliest childhood. He was much spoiled by his mother, clung to her with a passionate love, slept with her in the same bed until seven or eight years old, suffered from pavor nocturnus until ten years old and in general, showed the typical picture of a fixed libido. In the presence of the father, he was always anxious, was cold, distant and hostile toward him. One of his earliest childhood memories is the following: "I was then still quite small, perhaps five or six years old. One evening, I was very lively and restless and my father was disturbed by my noisy play. He shouted at me angrily. I was frightened and in a moment I saw a black angel at the door with a great knife in his hand. "It is the angel of death" went through my mind and trembling from anxiety and fear, and sobbing, I fell on my knees before my father begging to be forgiven. Father could scarcely quiet me." This episode reminded the patient of the Biblical story of the sacrifice of Isaac which he probably already knew at that time. He identified himself with Isaac whom his father wished



to slay. He also always thought that he would be sacrificed by his father for his elder brother, the father's favorite. Such "attempts at rationalization" of his anxiety and his hate against his father have engrossed the patient since his childhood. The positive homosexual emotions, on the other hand, even in earliest childhood, came under a deep repression. But just these emotions have the highest social value, they become by sublimation the sources of all love for humanity, they afford the positive impulse toward cultural adaptation. Without them, the man becomes asocial. Hence in the patient, the strong mistrust, the eternal suspicion and anxious expectation toward every new man. His own hostility he seeks to keep away from his consciousness by projecting it upon the outer world but it reappears in consciousness in the form of delusions of persecution.

When I wrote this article, I had not yet seen Freud's latest work on Paranoia in the third volume of the *Jahrbuch für psychoanalytische Forschung* and did not know that the mental mechanism of this not quite typical case is characteristic of paranoia in general. I am so much the more glad to be able to confirm by this observation much which Freud says concerning paranoia.

## II. Homosexuality and Paranoia,<sup>3</sup> by DR. R. MORICHAU-BEAUCHANT, Poitiers, France.

The observation given below seems, although it is incomplete, to afford an interesting contribution to the study of the relations of paranoia to homosexuality, to which relations, Freud and Ferenczi have recently called attention.

Mr. X., forty-seven years old, teacher, married, father of three children, consulted me in March, 1911. I had known him for many years and held him in high and friendly esteem. He was a man of blameless habits and strongly religious. To his profession of teaching, which entirely occupied his interest and satisfied him, he is passionately devoted. For several months I could notice that his mood was changing, he became troubled and no longer appeared to be in his normal condition.

He came to obtain my help for an ordinary eczema. I then spoke with him concerning the changes which I had noticed in

<sup>3</sup> Homosexualität und Paranoia. *Zentralblatt für Psychoanalyse*, Vol. II, No. 4, Jan., 1912.

his condition and behavior and asked him whether at this moment he had any surmise concerning this change. Upon being closely questioned, he decided to tell me the following story which aroused in me the highest degree of astonishment.

"During the last year," so he said, "on a journey with one of my sons (who is sixteen years old) the latter shared a bed with me at the inn. In the night, I had a pollution which greatly disgusted me. I took pains to cleanse the bed linen in the fear that the people of the inn might think me guilty of gross immorality. Last autumn, I was in the neighborhood of P. with my two sons (aged seventeen and nineteen years). On one of our walks, which we took in search of mushrooms, at a place where we were somewhat separated from one another, I suddenly saw an individual coming toward us, the man said nothing but looked at me with a peculiar expression. Immediately, it came into my mind that he might have followed us in order to observe us and that he suspected me of immoral acts with the boys. One month there had also appeared an article in a socialist paper of P., in which it told of a citizen who had practiced fornication with boys and whom they were about to detect."

Our patient thought at once that this meant him and has lived since in constant anxiety. He thought his enemies were using this means to destroy him by complaints of immoral acts: On the street, the street-urchins observed him with suspicious glances; if he went past a building in course of construction, the workmen ceased work and made adverse remarks concerning him. He thought himself watched on all occasions; they spread the most evil rumors concerning his affairs. Once when he proposed to some of his pupils to make an excursion into the country to inspect the configuration of the land, all declined, as he said, with frightened expressions. Besides, he thought that his superiors were in a plot and wished to destroy him because they found him too religious and too simple in mind. The Syndicalists and the Free Masons had decreed his downfall for the first of April, it might be that a defamatory complaint would be lodged against him before the court, it might be that he and his children would be struck down by hired assassins in the darkness of the forest. He exercised the precaution therefore never to go out without a loaded revolver.

I tried in vain to show him the improbability and foolishness of his ideas. I could not convince him and some days later, he sent me a letter in which he gave expression to his fears and sought to induce me to testify to his innocence or to avenge him in case, as was to be expected, he should disappear on April first.

I have since seen the patient many times and could determine that his thinking ever revolved about this same idea. He spoke less but still often of immoral acts of which they would accuse him and of the resentment with which certain of his superiors and comrades persecuted him on account of his political and religious opinions and who aimed at his death.

I noticed also that his profession, to which earlier he had been extraordinarily devoted, no longer interested him; he wished repeatedly to obtain his transference to the retired list before the usual age limit had been reached and had also already spoken of this to his superiors.

Then he managed to live again in apparently normal manner. No one outside of two or three friends to whom he had mentioned something of his fears, suspected anything of his delusions which were related only to this one point. For the rest, he kept his reputation, enjoyed general high esteem and passed for merely a little neurasthenic.

I had no opportunity to question him concerning his past sexual life, though he had once admitted to me his strong need in this direction.

Some weeks later, when I became acquainted with the works of Freud and Ferenczi, this observation attained a very special importance for me and seemed to me to afford a confirmation of their conclusion. It does not seem to me doubtful that my patient had presented up to this time no kind of signs of his repressed homosexual tendencies. But when they appeared, they were most particularly unbearable to his intensely moral personality and were projected from the ego in the form of delusions which we have reported and which were related, not without reason, to accusations which others contrived against him since they correspond to self-reproaches which he had raised against himself on account of his perverse wishes and had repressed into his unconscious.

*(To be continued)*



TRANSLATION  
WISHFULFILLMENT AND SYMBOLISM IN  
FAIRY TALES

BY DR. FRANZ RIKLIN

TRANSLATED BY WM. A. WHITE, M.D.

OF WASHINGTON, D. C.

(Continued from page 332)

It may be added that the branch, like other objects: magic wand, the stalk of life, pistols, syringes, rays of from ten to fifteen centimeters long, the raised finger, play a rôle of absolutely like significance in the sexual symbolism of the mentally diseased.

*The German Cinderella.*—In the German Cinderella, that we have denominated as the type of wish-fulfilling fairy tales analogous to the dream, we come across at the beginning a similar symbolic motive to that of the "Little Hazel Branch."

Cinderella had a stepmother who neglected her in favor of her own two children in the usual way. The father once went to the fair and promised all three daughters to bring something back for them. The stepdaughters wished for beautiful clothes, pearls and precious stones but Cinderella begged him to break off for her the first branch that hit his hat on the way home (compare "Oda" and "The Little Hazel Branch"). This was a hazel branch. Cinderella took it to her mother's grave, planted it there and watered it with her tears. Instead of directly becoming a fairy prince like Oda's serpent or the bear in the "Little Hazel Branch," the branch grows into a wish-tree from which the maiden receives everything, the most beautiful gold and silver clothes and little golden slippers in order to please the prince and with the help of which she finally makes the wish-prince her husband.

*The Singing, Jumping Lark* (Grimm).—A man was going to make a long journey and wished to bring back presents for his three daughters. The youngest desired, in this fairy tale, a singing, springing lark (Löweneckerchen=Lerche=lark). Finally, on the way home, after a long search, he sees one seated in a tree, and tells his servant to get it for him.

A lion (Löweneckerchen=Löwe=lion) springs out (such a play upon words one might meet in a dream or in dementia præcox; children's songs and rhymes do the same) and threatens to eat the merchant for trying to steal from him his singing, jumping lark.

(A physician used to say to a patient with a sexual disease, "Here you are with your little bird (Vögelein), why don't you let it out!" In the dialect of our region the penis is the bill, beak (der "Schnabel," das "Schnäbeli"). "Vögeln" is the vulgar expression for coitus. I must return to these slang expressions in order to support the inductive arguments entered upon.)

Nothing can save him unless he promises to give to the lion what he first meets on his return home: "if you will do that, however, then I will give you your life and also the bird for your daughter." The story then goes on as in the "Little Hazel Branch." The lion is afflicted, however, with a different spell. At night he is a prince in human form, during the day time, however, he is bewitched and is a lion. At night the wedding is celebrated and during the day they sleep.

Mythology gives us some information about the spell that lay upon the lion.

"There is a universal belief, and a cult bound up with it, of the separate existence of the soul when it has left the body after death. Two phenomena of human life have occasioned this belief: the dream and death. Sleep and death exist in the ideas of most peoples as like processes and are therefore treated in poetry as brothers. While, however, after sleep, life returns, nothing is perceived of this return after death. Therefore they must be constant attendants of the body, the Fylgia (followers), as the old Germans call them, which abide somewhere else, and so arises the idea of spirits in nature, of the spiritual realm. To this knowledge of his double being man can only attain through

his dreams: in them he learns of the existence of the second ego. The dream-life also explains in the simplest manner the forces which are ascribed to the liberated soul: the gift to view strange places and distant times and to assume all sorts of forms. Through dreams man learns, according to general Germanic beliefs, his future. The dreamer sees many things in his sleep: the soul has left his body, tarried in secret and distant places, had intercourse with dead persons, taken all sorts of animal forms."<sup>9</sup>

The soul usually slips out of the sleeper in the form of a small animal when it goes on these dream journeys. He must not disturb it in this position for it would not be able to find its way back and then he would die.

With the idea of the dream-soul goes along also that of night-mare (*Druckgeitser*?).

"Out of the belief in the dream soul has grown the conviction that certain men possess the power to separate their souls from their bodies and take other forms."

"In the form of dangerous animals (wolf, bear, dragon) such men bring harm to others; therefore it is strongly punished by law. Here belong the witches and *Völven*" (*volu* = magic wand, *volvur* = sorceress). "They make bad weather, make men and beasts sick, are able to transfix people to a spot, and can take all possible animal forms."

In fairy stories they can, in the same way, wish men into other forms.

"In the belief on the changeableness of the human soul took root further the belief, widely spread over Germanic territory, of the werewolf (man wolf), that is a man who is able to take the form of a wolf." In fairy tales such werewolves are sometimes enchanted men who only at special times can lay off the wolf skin.<sup>10</sup>

The lion in the "Singing, Jumping Lark" stands also as the hero, in a number of other similar tales, under such a curse. In this kind of tale the prince or the princess is in the beginning under a hostile power and the wish-fulfillment consists in the

<sup>9</sup> Mogk, "Germanische Mythologie." Götschen, Leipzig, 1906.

<sup>10</sup> Mogk, I. C. The night-mare root of mythology calls for special treatment. The "Traumdeutung" appeared first in 1900. Laistner's "Rätsel des Sphinx" (Berlin, W. Hertz, 1889) unfortunately is based on a not very complete knowledge of the dream.



desire to avoid this influence in order to be united with the heroine of the story whom we have substituted in the wish-dream with the figure of the dreamer.

In the "Singing, Jumping Lark" the second part, which we did not follow above, deals with this theme.

The utilized mythological material indicates a new root out of which has developed the symbolism of the fairy stories in so far as it is mythological. It is the dream symbolism itself with the views developed therefrom by the dream observer, primitive man.

This knowledge is a great support for us; we are no longer surprised to find the dream, the fairy tale, and the symbolism of the psychoses all so related.

Several Icelandic fairy stories have motives quite like that of the "Singing, Jumping Lark," for example: "The Prince Bewitched into a Dog" (Rittershaus, "Neuisländische Volksmärchen").

*The Brown Dog* (first variant of this tale).—A king had four daughters of which the youngest was the favorite of the father. Once while hunting he lost his way (so commonly begins the entrance to the sphere of sorcery). He came upon a small house, in which there was only a reddish brown dog. He and his horse found good shelter. After he had left the house the next day the dog stopped him on the way and took him to task as ungrateful for not having expressed thanks for the hospitality. The king then had to promise him the first thing that he met when he returned home; it was his youngest daughter; the rest of it goes on as in the tale of the Singing, Jumping Lark. The husband of the daughter who had taken her away as a dog, sleeps with her at night as a man in her bed. Further she must bring a lot of proofs of obedience and faithfulness; the children were first taken away from her. Then she permits herself unfortunately to be persuaded to relate the secret of her marriage to her mother, who advises her to hold a light in the sleeper's face so that she can at least see it once. (One compares the corresponding act of Psyche in "Amor and Psyche" by Apuleius. The light serves thus to discover sexual secrets!) He awakes saddened; for he could otherwise have been delivered after a month; now, however, he has fallen into the power of his fiendish stepmother, who

has cast the spell upon him, and must probably marry her daughter. Then he gives advice, how help may yet come through his bewitched kinsmen, and disappeared.

She follows his advice, arrives at the right time at the impending marriage of her husband with the daughter of the sorceress, obtains for her magic jewels, which she wanted, permission to sleep alternate nights with the bridegroom. He was given a sleeping potion, however, each time by the witch bride. His neighbors called his attention to what was going on and he only feigned to drink this potion on the third evening, and at night, as he hears the moans and story of suffering of his true bride lying near him, his memory returns to him, he is delivered, and the witch's power is broken.

This tale, whose single motive in similar connection often recurs, shows us again, that the spell was cast on the hero by a hostile power, the reason being that he was to marry a rival of the heroine (*i. e.*, in the dream of the dreamer) and was unwilling to do so. That compares well with the delusions of certain patients, that their loved one is misled by others and taken away from them. The sexual rivals in the fairy tales are usually sorcerers and witches, who at the conclusion, through the wish-fulfillment of the fairy-tale dream, are very severely punished.

We do quite the same at night in similar circumstances with our own rivals in dreams.

An acquaintance had it in mind to woo a maiden. In the house of his admired he met other young people one of whom he suspected might also have intentions. After an invitation he dreamt, among other things, that he killed his adversary, with whom in waking life he was pleasantly related socially. Finally he shoved him under the piano (he himself is a good piano player) so that only the head projected, namely in the spot where otherwise the pedals would be found. Now in playing he tread upon the head of the poor rival with his feet!

As is fully represented in Amor and Psyche the heroine also here in the fairy tale of the brown dog is sensible of the embraces of a man with whom she sleeps but who she cannot see.

One is thereby reminded in the liveliest manner of fully analogous hallucinatory perceptions which our patients frequently relate.

One such patient experienced this connubial embrace clearly every night at two o'clock and had to answer it. That this automatism had always to appear when the clock struck two, as the symbol for the existence of two loved ones, depends upon a similar comical association, as that which accounts for the association of lark (Löweneckerchen) and lion (Löwe).

That the dog appears here as a sexual symbol in condensation with witchcraft as a double being appears, after the former examples, to be without doubt, and it is shown by such examples as that the dog is one of the commonest sexual animals, that is symbolic animals, for the masculine-sexual in the dream and in the dream-like experiences of the insane.<sup>11</sup>

The sleeping potion (in other fairy tales it is a sleep-thorn) plays, in the same connection as here, an important rôle in fairy tales, rarely in other significance, that is without dependence upon a sexual wish-structure. The being neglected for another, a rival, is here symbolically indicated in this manner, bearing throughout a character of dream origin. Through some means the spell is finally broken and the prince again recognizes the spurned bride by his side. The matter is so brought about that he has no blame for his forgetting and deserting, but the strange, bad influences are at fault.

In the "*Grumbling Ox-maw*" (Rittershaus, XI, p. 50) when the queen was dead and her husband appeared inconsolable, there entered the royal halls a beautiful woman with a goblet full of wine. She let fall, unnoticed by him, a drop upon the lips of the king. Then he arouses from his brooding, drains the goblet, and forgets his dead spouse. He now marries the beautiful stranger, who naturally is a sorceress and as a bad stepmother bewitches his only daughter in his absence and changes her into an ox-maw, which in this fairy tale always has the rôle and attributes of a human being. The ox-maw is delivered by a prince whom she promises to marry. The mother of this prince suddenly sees, on the marriage night, instead of the maw a beautiful princess, takes quickly the put aside covering, that is the maw, and burns it. (For the significance of fire see earlier pages; for the burning of the magic covering on the wedding night see the remarks on the

<sup>11</sup> Compare also Jung, "Diagnostische Assoziationsstudien," VIII Beitrag, p. 47.



fairy tale "Kisa" in the chapter The Transposition Upward, also the Icelandic Cinderella cited.) According to Rittershaus (p. 52) the drink of oblivion, which the sorceress gives to the sorrowing king, appears already in the Völsunga Saga; then further in the tale of "*The True Bride*" (Rittershaus, XXVII, p. 113). A royal pair had no children. When the king threatens to kill his wife if she has no child on his return from his voyage, she takes the part of one of his servants on his journey, without being recognized by him, and he takes her in his tent as the most beautiful of three women. She returns home unrecognized; she bore a daughter, Isol, and died. (So Isol is by fate made an especially conspicuous being.) Isol found later on the shore a small, very beautiful boy, in a box, named Tistram, rescues him and takes him to herself to espouse. And so Tistram is introduced as a wonder child. (Compare the finding of Moses by the daughter of the Egyptian King!) This motive frequently occurs in fairy tales and dominates a number of examples of sexual transposition symbols to be mentioned later.

The king marries a sorceress for his second wife. When he goes with Tistram on a journey she seeks to destroy the blonde Isol and to give her daughter, the dark Isota, to the returning Tistram to wife. When Tistram first inquires for his true bride the sorceress gives him a potion so that he quite forgets Isol and is willing to take Isota. Isol comes to the court as a poor maiden, and in place of the dark Isota who secretly bears a child, is obliged to ride by Tistram's side in the wedding procession, disguised as his bride but is forbidden to speak to him. In order, however, to awake the old memories, she says, as they pass an old ruin:

Formerly thou hast shone upon the earth,  
Now thou hast become black with earth,  
O my house (referring to her burned "Woman's house").

and upon seeing a brook:

Here runs the brook  
Where Tistram and the fair Isold  
Pledged her love and faith.  
He gave me the jar,  
Gauntlets I gave to him,  
Now can you remember well.

The prince will not go to bed with Isota that night until she explains to him what these utterances signify that she has given expression to during the ride. As she knows nothing of them she is compelled to go and ask the disguised Isol, whereat the bridegroom discovers the plot, remembers Isol and takes her for his wife.

Also in the fairy story of the "Forgotten Bride" that is met with in many peoples and in which usually a false kiss causes the forgetting. It is related in one of the Icelandic settings, that the prince, returning home, drank water (in spite of the warning of the bride!) from a golden goblet, and as a result forgot the bride.

In "The True Bride" (Rittershaus) we have a wish-structure of a sexual nature from the standpoint of Isol. Instead of the wish-prince being enchanted and changed by a bad power into a sexually symbolic form, here the forgetting of the bride is brought about by the sorceress, and the overcoming of the difficulty and the wish-fulfillment lies in this, that Isol is able to bring his memory back, similarly as the heroine in the "Forgotten Bride," through other means. In a Greek fairy tale<sup>12</sup> the princess also<sup>13</sup> escapes a dragon by letting herself be locked in a chest. This chest comes now into the possession of her beloved, who as a result of the mother's kiss had forgotten the bride. After a few days the maiden is discovered by him and he marries her (Rittershaus, p. 132).

<sup>12</sup> Schmidt, "Griechische Märchen, Sagen und Volkslieder," Leipzig, 1877, Pd. 12. "Der Drache," cited from Rittershaus.

<sup>13</sup> The above fairy tale is related to the chest motive. The chest, which is to be opened by the beloved, looks very sexually symbolic.

*(To be continued)*

## ABSTRACTS

Internationale Zeitschrift für Aerztliche Psychoanalyse,

ABSTRACTED BY L. E. EMERSON, PH.D.

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(Vol. I, No. 4)

1. The Gottmensch Complex. Prof. ERNEST JONES.
2. The Psychological Analysis of Socalled Neurasthenic and Similar Conditions. TRIGANT BURROW, M.D., Ph.D.
3. Moral Judgments as Hindrances of Psychical Treatment. DR. MARCINOWSKI.
4. Eroticism of the Posteriors. DR. J. SADGER.

1. *The Gottmensch Complex*.—Every psychoanalyst has had patients who, in their unconscious phantasies, believed themselves to be God. Such a megalomaniac phantasy is scarcely to be understood if one does not recognize the close relation between the idea of God and of the father. From a purely psychological standpoint the idea of God is simply an enlarged, idealized, and projected idea of the father. The identification of one's self with the beloved object is a regular thing and regularly takes place with the child in relation to its father. It is only natural, therefore, that a similar relation may evolve with respect to the heavenly father, God. The passage from a more obedient imitation to identification takes place very quickly, sometimes, and in the unconscious are practically identical. The minor prophets and preachers speak sometimes in the name of God with such overwhelming authority that one cannot help think but that in their unconscious phantasies they identify themselves with God.

These phantasies are not uncommon; naturally they are met more often in men. But women have a corresponding phantasy: they believe themselves to be the mother of God.

According to the author the principal root of the complex lies in an enormous narcissism. All of its characteristics come either directly from narcissism or are in close relation to it. Unmeasured narcissism leads inevitably to an overwhelming admiration of one's own



power and superiority, physical as well as spiritual, to a trust in one's own wisdom. Two psycho-sexual tendencies are especially closely bound up with this, autoerotism and exhibitionism. They are two of the most primitive tendencies, and as we shall see, play the weightiest rôle in character building. The opposite of exhibitionism, the looking and knowing craving, is always found with it and has its part in bringing about the end-result in character.

A negative characteristic, excessive humility or modesty, repressed, manifests itself often as excessive vanity or vaingloriousness. The strength of the fundamental tendency is often only to be inferred by the strength of the reaction against it. Bound up with narcissistic exhibitionism, with the wish to show the body, or a part of it, is the belief in the irresistible power of the body. This power, the same possessed by the Tabu king (Freud, *Imago*, S. 306-315), or the Sun and Lion Symbolism of Mythology, is for good or bad, creation or destruction, and thus is typically ambivalent.

Especially typical reaction formations are self-satisfaction and self-renunciation. The latter is commoner and more characteristic. Such a man is as unapproachable as possible and hides himself in a veil of secrecy. He will not live near others. Such a one told with pride of living in the last house in the city. They lay the greatest stress on private life, which is on one side the direct expression of autoerotism (masturbation), and on the other side a reaction of the repressed exhibitionism. There are, therefore, two elements in this tendency: the wish not to be seen, and the wish to be remote and unapproachable. The meaning of this wish is most clearly seen in its extreme form. The paranoic, King Ludwig, is typical. He began by imitating Ludwig XIV and finally identified himself with the sun as king. He would not speak with the people unless there were a separating barrier between him and them, and when he went out he ordered the guards to tell the people to keep in, lest they be killed by the effulgence of his glory. This can be explained only by his belief in the destructive power of the rays streaming from him and his anxiety corresponds, possibly, with repressed death wishes. We have here a modern version of the old Egyptian, Grecian, and Persian projection of the father as a Sun God, which idea also played an important rôle in early christianity. Bound with this desire for inaccessibility is the desire for mystery. Such a man is very slow to tell his age, or name, or business, to strangers. Such a man lived eight years in a Western city of America without any of his friends knowing whether he was married or not. Such a man writes unwillingly and ungracious letters. In spite of a strong demand for correct

speech, he seldom expresses his thought clearly and directly. His diction is characteristically long winded, involved, rambling, and so bombastic and dark that the reader can hardly understand what is meant. In striking contrast to this is the fact that the handwriting is generally clear and readable. On the other hand, with some of these people the handwriting is completely illegible. But in both cases the person concerned is full of overwhelming pride. That all these secrecies betray not only narcissistic values to the person involved, but also autoerotism in general, and especially masturbation is too well known to need emphasis here. The inclination to exclusiveness manifests itself quite clearly on the psychic side. Such people are unsocial in the wider sense. They take up only with difficulty any activity with others, be it politics, science, or business. Their ideal is to be "The man behind the throne." As is to be expected there is associated with this strong tendency to exhibitionism a complementary tendency, curiosity. Often one meets a higher form, a sublimation, of this tendency in the form of a great interest in psychology. If one is by nature endowed intuitively to look into the souls of others he will use it, whatever his calling may be. If he is not so endowed, he wishes he were and thus takes up psychology or psychiatry, or at least an abstract interest in such subjects. This wish to compensate for a natural defect gives us obviously the explanation of the notorious fact that psychologists of eminence so often show a stupid lack of knowledge of the human spirit. It explains further their constant attempts at finding "objective" methods of studying the mind, which shall be independent of intuition, and their antagonism towards such methods as psychoanalysis, which deliberately cultivates intuition. The flood of curves and statistics which threaten to suffocate the science of psychology bear witness to the distress of these people. Such an one is especially interested in short cuts to the knowledge of the human soul and turns with pleasure to such methods as the Binet-Simon tests, psychogalvanic phenomena, word association reactions, or graphology, in a mechanical manner and always with the hope to find results automatically.

A less direct result of narcissistic exhibitionism is the phantasy of omnipotence. Perhaps this is most closely connected with the feeling of the power of money. Such men set out to be multimillionaires and delight in the thought of their power. The characteristic sub-group in this relation is that of omniscience. This can be regarded as simply one form of omnipotence, for whoever can do anything, knows everything also. The path from the one to the other shows itself most clearly in prophesy. The difference between a god and a prophet is often indistinguishable (Mahommet!).

One of the worst characteristics of the type under consideration is the opposition to any new knowledge. This follows from the feeling of omniscience. There are two typical forms of reaction: (1) The one is to modify the idea, give it a new name, perhaps even spell it differently; (2) The other is to deprecate the newness of the idea, take away all emphasis distinguishing it from older ways of looking at the subject and finally maintain that one had always known it.

Of especial importance is the relation of the individual to time. Age, death, power, wishes, hopes are naturally of the greatest importance to one who holds he is omnipotent and omniscient. The relation to past time concerns his own memory. This he holds infallible. The ease with which he prophesies shows his feeling of power over future time.

Such people are interested in speech. They regard themselves as authorities in literary style. Two characteristics stand in direct relation to narcissism, their relation to advice and to giving judgment. They give advice reluctantly because of the responsibility. Religion is of the greatest interest to such people. As a rule they are naturally atheists, because they cannot allow the existence of any other god.

One of the characteristics of such people is the overwhelming desire to be loved. It is seldom expressed directly and manifests itself more through a striving for praise and admiration than for love. They busy themselves much in their unconsciousness with their own immortality whether it be a continuance of their life, or a series of rebirths. In general such people have a passion for romantic idealism often hidden under a glow of materialism or realism.

The castration idea plays a quite important rôle both in the form of castration wishes against the father and a fear of castration on the part of the younger generation. The latter is as a rule the stronger and lends naturally to a strongly pronounced jealousy against younger rivals. The obverse of this is seen in the desire for proteges.

Not all gods have the same characteristics, therefore the type varies according to the particular god the person identifies himself with. By far the most important of these variations attaches itself to the idea of God's son. The three principal characteristics are rebellion against the father, salvation phantasies, and masochism. In other words, an Œdipus situation in which the hero-son is a suffering savior. In this class the mother plays an especially important part and her influence shows itself in particular ways. Salvation can often be gained only by a terrible self-sacrifice, through which the masochistic tendency gets full satisfaction.

It is interesting to note that under the influence of the man-god



complex characters develop in two ways. On the one hand we have men who are truly godlike in their characters, and on the other, men who are of almost no use socially.

The single details of the above sketch are taken from different subjects. The author has never seen anyone who possessed all the characteristics mentioned. The unity is artificial.

2. *Analysis of So-called Neurasthenic and Similar Conditions.*<sup>1</sup>—For a long time scientific medicine has had a deeply rooted opinion as to the nature of neurasthenic and similar conditions. The time has come to consider critically this picture of the illness and the medical view from which it has arisen.

Etymologically, neurasthenia naturally means an exhaustion of the nerve tissue. This change is either chemical or molecular and thus neurasthenia is essentially an anatomical process. From the standpoint of physiological pathology this definition is sufficient. But is the clinical picture actually such as one might expect?

Observations were made under the unfavorable conditions of an unquiet out-patient department and with occasionally only weekly visits, instead of daily.

A case is that of a woman of forty-five with the typical syndrome usually called neurasthenia.

From earliest youth the patient led a quiet secluded life. She had to work hard and was burdened with cares and duties. As she herself expressed it, she was never allowed "to be like other girls." Until four the patient had always felt well. At this time, however, she began to lose strength, which manifested itself in physical disturbances, on account of over-exerting herself to help a sick sister and her two little children.

In the beginning her principal trouble was a general weakness, a bilious attack with pain in the back and groin. A medical examination found no cause, and then, as so often is the case with women, the trouble was laid at the door of the abdominal organs. And she was treated like so many by means of an operation. This interference consisted in removing the uterus and the appendix—also a floating kidney was fixed. All this however did not reduce the symptoms in the slightest. These symptoms really lacked characteristics that would permit their being explained on an organic basis. Under these circumstances the psychoanalytic method discovers the weight-

<sup>1</sup> Partially presented at the meeting of the American Psychological Association, Washington, D. C., December 29, 1911. Fully presented at the Meeting of the American Psychoanalytic Association, Boston, Mass., May 28, 1912.

iest unconscious affective tendencies which are always striving for expression and satisfaction. When these instinctive tendencies are blocked they take substitute satisfactions—or, are bound up, with *organically associated relations*.

An analysis of the dreams of the patient showed that the principal content of constantly recurring dreams was about marriage and maternity. This showed that the complexes of the patient were principally concerned about sexuality. She dreamed, for instance, that she received attentions from some young man, presents, flowers, notes, and love tokens,—and also that she held a child in her arms, that she conceived a child, that she was pregnant and carried a child, that she bore a child, etc. Often she identified herself in her dreams with her sister, and had husband and children. In over a hundred dreams there was not one which did not show, with the help of analysis, this tendency.

A close observation showed that her symptoms had a striking similarity to those of pregnancy: headache and nausea, especially in the morning, a feeling of weakness; pains in back and limbs—the sensations of weight and fullness in abdomen and legs thus making it hard to go up and down stairs.

The patient had a long and complicated dream, the details of which, on association, showed close connections with babies, pregnancies, and births, and awoke feeling “nervous” and with severe pains in body and back, which lasted the whole day.

Many other dreams are related with an account of the following symptoms showing the close relation existing between dreams and symptoms.<sup>2</sup>

It is not possible, however, to give an adequate account of the closeness of this relation without going very deeply into details.

The significance of this whole work shows that while many, if not all, of the symptoms of neurasthenia cannot be adequately explained on an organic basis, they can be adequately explained as the result of unconscious tendencies and desires striving for expression. These unconscious processes are most obviously laid bare through the analysis of dreams, and the psychoanalytic method, as a whole, is a way to the most profound scientific study of neurasthenia possible.

3. *Moral Judgments as Hindrances of Psychical Treatment*.—It is obvious that in psychotherapy no greater difficulty is known than the moral evaluating of the facts learned. Thus patients enter into personal relations with the doctor.

<sup>2</sup> See Dreams as a Cause of Symptoms, by G. A. Waterman, Journal of Abnormal Psychology, Vol. V, No. 4, p. 196.

The neurotic, just like a child, demands love from all, and reacts strongly and personally if he knocks against any fact that he thinks means a denial of the doctor's love. About him he is always thinking and dreaming. The self-reliance of the patient comes in question here, the more he doubts his own personal worth. There thus comes about either the positive or negative Übertragung, or transference, according as he reacts with love or hate. A third motive, a secret feeling of guilt, may lead the patient to say: if you knew me as I really am, etc. and this leads to reserve and repression. This impatiently waiting for a proof of personal moral evaluation is obviously (so thinks the author) a great hindrance to the treatment, as soon as this results in, or leads to, the laying bare of the patient, including his loves and hates.

The rest of the paper is largely an emotional reiteration of the above position. The position taken by the author is only correct if one understands that he means by a "moral evaluation," condemnation. Obviously a patient condemned is a patient lost. But the doctor cannot refrain from making a decision on the character of concrete acts, as moral. He needs, however, a wide conception of morality, and a keen discrimination between what is bad, objectively, and what is bad, morally.

But instead of a passive, merely-looking-on attitude, being the best, as the author seems to suggest, a positive sympathy and relative approval is the only attitude likely at all to lead to good results, even to the getting of "facts."

The author says, "The reasonable patient says to himself: I want above all things to get well; I will use this man's knowledge to the utmost; what he thinks of me in general is all one to me."

The author seems sublimely oblivious of the fact that if the patient had any such superior attitude to another's opinion of him, he would have no neurosis at all. A "reasonable" patient is a contradiction in terms. If he were reasonable he couldn't be a patient. Hence it is the office of the psychoanalyst to overcome his unreasonableness by positive sympathy and efficient identification of himself with the patient, so that the needed personal facts can be learned and openly considered, evaluated, and finally *acted* upon.

As Freud has proven, and as Jelliffe shows in his paper on "transference," the sine qua non of a successful psychoanalysis is a positive "transference" finally generalized and sublimated.

4. *Eroticism of the Posteriors*.—From among the numerous people who have a more or less anal eroticism, the author selects a group distinguished by special characteristics. There are people whose sex-



ual feelings are less attached to the rectum than to the continuation of that zone, the buttocks, and, in part, the thigh. There is a close connection between anal eroticism and posterior (Gesässerotik) eroticism. In some cases it is but a continuation of anal eroticism. The right to this new and apparently superfluous terminology lies in its specific symptoms, and especially in its relation to two of the most frequent perversions: homosexuality, and flagellation.

As the name indicates, a person afflicted with this disease shows a principal or exclusive sexual interest in the buttocks or its neighbor the thigh. Often there is an organic predisposition in especial fullness, massiveness, and strength of these parts. Inheritance and education act similarly. Not only do the parents and grandparents possess a fullness or strength of these parts, but they also show their affection often by patting the children there. The mother, not infrequently, kisses the baby there, strokes and caresses, or even bites it there, and later, when the child has grown up, cannot refrain from giving it a little pat on this place.

Such persons begin to show in their earliest years, at the age of three or four, an especial interest in the posteriors of children and grown-ups. They manifest often the greatest shyness in getting glimpses of these parts: peeking in the bath-room just as the mother gets into the bath, or in the dressing-room when she is undressed, or run suddenly into the bedroom just as she is about to have a douche. Later they show a great pleasure in exhibitionism between sisters or playmates.

It appears that the posterior serves for perversions better even than the actual sexual organs, and people with strong posterior eroticism act as if it were the genitals, or as a form of fetich. Thus there are not a few men who, on the street, observe the posteriors of girls more than their faces. And girls, with such parts highly developed, act in such manner as to show it off to best advantage. They act coquettishly with these parts, through skilful motions, and hold up their dresses in such manner that their purpose is clear. A male patient said that on the street he always looked at the posteriors of girls and women.

Many pederasts love youths or men in very tight garments, liveries, or uniforms, which show in plastic form the buttocks and thighs. Especially preferred, they all say, are footmen, hunters, grooms, soldiers (in Austria the Hungarian Regiment especially), conductors and policemen.

But perhaps the most important rôle played by this form of eroticism is in flagellation. Here the muscles quiver and twitch almost

coitus-like with the painful strokes. The changes in the skin, the streaks, the reddening, swelling, or at last the blood running down, are perceived by the true flagellant with great pleasure. This eroticism of the muscles often reaches finally almost to an orgasm. Many feel at the same time an intensive passion in the genitalia.

Many flagellants have said that as children their first sexual feelings, or indeed erections, were noticed when they saw sisters or schoolmates spanked on their naked backsides. In other cases there has been the same thing take place when they read of striking the slave in *Uncle Tom's Cabin*, or in reading the history of culture.

A homosexual flagellant told the following: "In my fifth year I had a sailor-suit made of thin linen. My twelve-year-old cousin loved to trot me on her left knee, in this dress, and thus bring her knee under my genitals and posterior. Through the thin dress I could feel her leg and its warmth very pleasantly and never could get enough of this game."

The tendency that nearly every one has of giving another, bending over, a slap on the bottom, goes back to the time when his mother used to give him a sort of caressing love-pat there, which was not unpleasant. A patient said, "In my dreams it is characteristic that I do not resent blows by my mother."

A close relation exists between posterior eroticism and narcissism. One of the roots of this lies in the early adoration of the mother. Another form, especially in boys, is associated with an over-valuation of the genitals, and in both sexes is related to the love pats of the mother. When a little boy puts on his first pair of trousers the admiration of the family tends to narcissistic over-valuation of the self.

In conclusion the author gives three symptoms of eroticism of the posteriors in a young student twenty-six years old, of a strongly anal erotic family. A part of the analysis follows: "In school I had a strange habit of leaving out whole letters in writing. The teacher called it an 'omitting illness'—"Did you leave out special letters?" "As to that I cannot remember—but something else I do remember: in the last year it happened that I wanted to write 1781, but I actually wrote 1871, thus reversing the numbers."—"That is a symptom of your eroticism of the posteriors. You really reversed the genitals, for you are not interested in the front side, only in the posterior."—"I wished, for instance, to write 'Abend,' but wrote instead 'Abnd,' omitting the e, or what is more significant, leaving an empty space."—"Hence two halves and an empty space between, i. e., the backside. Do you usually omit the letter in the middle of the word?"—"That I cannot affirm, but probably."—"How was it now with the number

1781?"—"I don't know"— $1 + 7 = 8$ , and the 8 lying down ( $\infty$ ) represents the two buttocks, with the anus in the middle. 1 stands for your member, and you like, you have told me, to stick the penis between the buttocks."—"Yes, I thought in the third Gymnasium class that it would not be bad if one could stick his penis backwards in his own anus."

Here then are three symptoms of posterior eroticism in this patient: (1) Reversal of a number because of a secret wish to use the posterior as a genital; (2) omitting a middle letter in order to have two halves and an opening—buttocks and anus; and (3) a number as a symbol of pederasty. There is needed further experience in order to establish this case or to supplement it.

### Zentralblatt für Psychoanalyse

ABSTRACTED BY DR. C. R. PAYNE

OF WADHAMS, N. Y.

(Vol. III, No. 1)

1. Psychology of Alcoholism. Dr. OTTO JULIUSBURGER.
2. Masturbation in Girls and Women. Dr. H. VON HUG-HELLMUTH.

1. *Psychology of Alcoholism.*—Juliusburger points out that while the apparent causes of alcoholic overindulgence seem to rest in the social life and customs, the real impelling causes lie in the unconscious of the individual. He does not agree with Ferenczi's statement that an enforced decrease in the use of alcohol in the German army had been followed by a corresponding increase in the number of persons suffering from neuroses and psychoses. Homosexuality seems to be one of the important unconscious causes of alcoholism. One prominent action of the alcohol is the abolition of repression, deadening of the higher nature, allowing the lower repressed instincts free play and satisfaction. This is especially plain in many criminal acts committed under the influence of alcohol in which the sadistic instinct can be distinctly seen. Although the article is of considerable length, it does not shed much new light on the problem under discussion.

2. *Masturbation in Girls and Women.*—This writer, being a woman herself, is able to give a clearer insight into the phenomena of masturbation among members of the female sex, infants, girls and women than a man could do. She compares the condition in the two sexes,



brings out some peculiarities of the practice among females and discusses its prevalence, etc., but seems to omit the important point of what effect masturbation has upon the health of the individuals.

(Vol. III, No. 2)

1. Contributions to the Knowledge of the Child Mind. DR. S. SPIELREIN.
2. Characteristics of Lecanomantic Divination. HERBERT SILBERER.

1. *Knowledge of the Child Mind*.—The author contributes three brief analyses, two of boys and one of a girl, which show how early and intensively the child becomes interested in the problems of the sexual functions, in particular, the origin of children. The close relation of anxiety symptoms to this early contact with sexual problems is well brought out. The development of scientific interest from sexual curiosity is also clearly shown. The results of all three analyses confirm the findings of Freud in his "Little Hans" case.

2. *Lecanomantic Characteristics*.—This is concluded in the next number and will be reviewed there.

(Vol. III, No. 3)

1. Reflex Hallucinations and Symbolism. DR. H. RORSCHACH.
2. Characteristics of Lecanomantic Divination. HERBERT SILBERER.
3. The Question of Psychic Determinism. FRITZ VAN RAALTE.

1. *Reflex Hallucinations and Symbolism*.—Rorschach discusses the relationship between reflex hallucinations, such as optical-kinesthetic and kinesthetic-optical and symbolism. He gives several examples from schizophrenic patients and then proposes the question: Is a definite optical impression utilized for an hallucination because it has previously been recognized as symbolically applicable in such a case or is the impression used as symbol because it has created this hallucination. To this, he says, no general answer can be given since the hallucination-type of individual must be taken into account. In some cases, the author believes that the kinesthetic sensations which are awakened by the optical picture named, seem to form the source of the symbolism.

2. *Lecanomantic Characteristics*.—In this article, Silberer takes up the general discussion of the data gathered in his investigation of lecanomancy in one subject; the actual analyses were published in the *Zentralblatt*, Apr.-Aug., 1912. He takes up in considerable detail

the patient's reactions to one hundred test words used in a word-association experiment employed after the lecanomantic experiments were ended. These reactions in the light of the previous analyses give very interesting glimpses into the workings of the complexes in the patient's mind. The whole investigation shows plainly how the subject's visions when looking into the basin of water (similar to crystal gazing) are entirely dependent upon complexes within her own mind. Silberer expresses regret that the series of experiments was interrupted by the subject's leaving the city before the psychic material could all be worked over. He points out that his results must be understood to be provisional rather than final as he has applied his method to only the one case.

3. *Psychic Determinism*.—Van Raalte describes a case from his own experience of an error in writing clearly determined by the unconscious forces of his own mind. This is another confirmation of the principles laid down by Freud in his "Psychopathology of Everyday Life."

## BOOK REVIEWS

THE MEANING OF GOD IN HUMAN EXPERIENCE. A PHILOSOPHIC STUDY IN RELIGION. By William Ernest Hocking, Ph.D., Yale University. Yale University Press.

This book is a profound enquiry into the nature of religion and its value to human experience. The study is divided into six parts. The first part enquires briefly and at once into the nature of religion whether it is found in intellect or in feeling and then what its worth as revealed in its most evident effects. This nature may itself best be studied by examining its fruits in the world. The effects of religion, however, in human history, productive as it has been of peace and war, of nation building and nation destroying are too contradictory to make it possible to know it by its utility. It is not so well in its utility as in its fruitfulness as "the fertile parent" of all the arts of human life and society, producing them and maintaining them, by a letting-in process or osmosis between the human soul and the Whole beyond.

In an individual a religious attitude is easily recognized, as if an invisible relation to an objective Reality give him a freedom and originality, even while exerting over him a compelling power, which make him a universal authority. He possesses already the source of worth and certainty, which possession marks religion as "anticipated attainment" of that which is the goal of his slower striving. The disposition or attitude of mind which this involves lies not in knowledge but in feeling.

Here then is the second part of the discussion, the relation of idea and feeling in religion. Religion has seemed to transcend all idea of it, therefore men look for further foundation than idea for faith. Comparatively and historically considered religion seems to spring from something beyond idea, which judgments of religion are the products not of religious instinct alone but even of "an acquired scientific instinct" in which, too, we are led to feeling as the root of religion. In the realms of the various sciences consciousness or feeling seems to be given a higher place than facts. Psychologically facts are real and valuable only as they enter the conscious self; biologically the intellect is only a later instrument of consciousness which itself lies farther back in feeling; pragmatically



since that which works to form value is feeling-consciousness rather than fact, feeling must be of a higher degree of reality than idea; while in the critical current of thought ideas have come to be judged from the outside because something greater than the idea lies outside and around it. Thus it is feeling that gives to religion its active value in life. However, though it may be argued that religion has its origin in feeling and in another kind of feeling its satisfaction, that in pure feeling a soul may be content, the religious consciousness has yet felt the necessity of expressing itself in idea even if by so doing it has brought religion down to materialistic and so inadequate idea. May not a further hypothesis be made, that feeling finds further idea beyond it, a still higher authority, and therefore in religion idea and feeling are finally united.

Feeling is actively already begun, a reaching out of an end, a pushing toward an object which when found becomes object of consciousness or knowledge, which is the realization of the value of consciousness found in feeling. In religion, then, as in all realms, feeling and idea are but successive stages of the same thing, neither being complete without the other. Religious feeling must rest at last in knowledge of its Object.

Idea may seem too rigid to express feeling but in truth even in its fixedness it accommodates itself to shifting reality as we incessantly construct and re-construct our idea-connections. Nor can it be objected that idea is inadequate because finite for every idea is infinite in its capacity and aim. Embracing the Whole at once and on each such idea we spin out our idea combinations and distinctions. Real Object is beyond all our feeling so that beyond idea which is subservient to feeling is the Idea and all feeling values are determined by reference to this one Idea. The finding of this reality for value standard is a matter of will: The will must be lifted up and carried on by a reality beyond it. But though there is room in religion for the creativity of our wills in our attitude toward religious truth and for a determination to take the whole as it is, there is still the independent fact of the Whole which must stand beyond our wills, and which is known by experience, an experience other than sensation. At the end of this discussion is inserted a note on Pragmatic Idealism in which our author denies that reality has no independence of our wills. Reality is what our wills make it and much more. The ideas and purposes of the Idealist can come only from an experience of independent reality.

Part Third is concerned with *Our Need of God*. It is a "series of meditations" undertaken to enquire what kind of a world would

satisfy our wills and to find in this enquiry some knowledge of reality itself. We need first a Monism that gives unity to the pluralistic tendencies of the world, a unity found in "a belief in a Reality that makes for rightness." We need an Absolute which is the Changeless, Eternal fact "under whom we are free to develop as under a familiar canopy," the principle of change we need being furnished by ourselves; but not One as various philosophies have found Him subjective and reflexive only, rather One who functions prospectively, too.

Though the fact of God's existence is already fixed our knowledge of Him must arise from evidence of Him in nature and in the experience of the whole of human experience. All things to be understood in their final meaning must be viewed as if by one outside experience or by us in association with such a one. The human will creates for itself such an association or companionship to discern later in experience that just such a God already existed.

This experience of finding God or how men know God forms the subject of the fourth division of the book. We must not neglect in the first place the original sources of knowledge of God. Man realizing first that there are things of which he is ignorant is cut off from activity by fear and awe. Then knowing that Another knows what he cannot he is again at one with nature. Our first knowledge then of God is knowledge of Another Mind, in which Mind and its knowing we can touch all experience and pass upon it.

Our knowledge of other minds is built up only through experience of social mind, which experience must come through revelation of other mind in its objective expression in the physical world. This social experience is continuous. If two beings can have a common experience it implies that they have always had some experience in common, some common field in which they can approach each other. The knowledge of the Other Mind is thus a knowing of this world, known thus socially and experienced continuously in common with another.

Nature in its seeming obstinacy and independence is a revelation of Other Mind, for it through sensation corrects my idea, advances it, balances it, creates myself through sensation as if another mind were doing it. Since nature creates self she is endowed with self-hood, is an experience of Other Mind. Space, energy, the qualities of nature belong to us all, outlast us all, so come from the Other Mind beyond us all. We reach thus a Realism of the Absolute which impresses itself upon nature giving it its objectivity. This Other cannot be other minds whom I meet with myself for they are dependent as I

am on the Other Mind revealed in nature. My knowledge of them is uncertain. Nor can it be the sum of such minds for we communicate because we are already one "in some prior unity" and furthermore other minds like myself are passive to experience but know the Other Mind when we find it working actively, creatively upon us. We cannot have social experience unless we find in the objectivity of nature the communication of an active self. This knowledge of God is present chiefly in a sense of stability and certainty "as the Other Mind which in creating nature is creating me" and through this knowledge of God I can know other men. This is the literalness of the God idea that God is a God of physical nature, a God through nature creating ourselves. A realism we must have for our Idea. Finding God, therefore, through self and nature, which I have found real in experience, my idea of God is an experience of God, and having by certain knowledge, Self, Nature, Other Mind, we know God who includes these three.

In the gradual development of the knowledge of a God predicates are made which must be corrected and altered as knowledge increases until man comes to know Him as the moral God. As the Other Mind He is the personal God; as the Whole including man He is Law. If in the knowledge of God we have found our fellow-men there is a companionship to be found also with God Himself. But here entering the personality of God, the development of religion centers more upon certain individuals who become for others authoritative in their experience.

It is in worship that men have this experience of a God and this forms the theme of Part Five. Worship is more than reflective thought. Thought looks at God objectively but worship seeks to bring Him in very presence into experience into our wills, opening up the very substance of the soul revealing it to itself. The aloofness from the mass to which this has led certain ones throughout the history of religion has given to this experience the name of mysticism and attached opprobrium to the name, but the truth in the experience inspiring many has shown it to be a necessity of religion. Mysticism must be understood not only in the report of the truth revealed but in the psychological attitude with which this truth is approached. The soul desires to get into relation with the Absolute because of a love of God which would reach Him and know itself in the light of God and would know the foundation of life, which knowledge and experience seems to come to men through worship. It is "an act of recalling oneself to being." Worship must first see self but self which out of its dissatisfaction with the world and then out of its experience in worship becomes socially creative.



Worship consists first in a preparation by a "purgation" of outward things, by meditation, in which the soul brings itself to a voluntary passivity before God ready to be lifted by Him into the last stage, an understanding with Him of this world. This experience psychologically interpreted falls within some law of rhythm, a law of alternation found in other normal experiences and activities—the "fundamental method of growth." It is a "discontinuity in experience" by which we alternately leave for a time that which is tried and known to enter into the unknown and then return to the known to connect our new experience with it. We must frequently leave the part which we are pursuing and orientating ourselves from it return to the whole but again we shall lose the practical value of life unless we come back in turn to our partial, individual activities. In worship, then, we pre-eminently recover this measuring of value with the Whole Idea adding "unity and self-consciousness to the whole body of our spiritual recovery." The mystic or worshipper comes into the presence of the Whole and has this viewpoint into which to receive the world. This is the answer to prayer.

With this new viewpoint rekindled the worshipper must return to the interests of the world. His place now as a creative soul is discussed in the sixth and last part of the book, *The Fruits of Religion*. The worshipper returns to the world first to reiterate old truth, which has become newly his through his experience. But he must become also a creative knower in the new light in which he now knows the world. First then arises dogmatic creation out of his judgment colored by the presence of God and a sense of His will. In the creativity of the new there is first an arousing of one's self in a heightening of a consciousness of former experience which is now newly related to one's self. Only in man "through alliance with the Absolute" is the reflexion necessary for this possible. "He who would create must do so by looking at the Whole." In this way the creativity or fruitfulness of religion comes through worship.

The mystic must be, furthermore, a prophet. His creativity must be historic action. "Happiness is the idea of the Whole in unhindered operation upon experience." We cannot find happiness in Stoical independence of experience and self-sufficiency toward it, nor in a vicarious or altruistic attainment, which by separating us from our immediate concerns leaves us yet unsatisfied. Rather "we must have a power over facts even in the midst of finite circumstances. We need then the "prophetic consciousness" which is a promise that our acts are to have validity, to hold good in the future. This gives a sense of power, of attainment already in effect over other men, power over

matter. In presence of this "things grow" as in presence of God.

Our lives may have some total historic meaning, which can be brought to consciousness and to valid expression. This must be realized in knowledge of oneself and of the world through relation to the Absolute. History is the mystic's expression of his certainty. It is only by living out in history and experience now that his immortality is won. This prophetic consciousness must have an environment in which it can thus live out in history. Here arises the purpose of the religious institution through which "religion brings to the soul its moral ideal and the kind of a world in which it can assert itself bringing men to singleness of mind and purpose." Such an atmosphere and such an environment have been accomplished by actual deed and in such we live.

This is in brief the argument of the book, a carefully developed philosophy of the religion founded in the Absolute which is the ultimate Reality and the personal God functioning in human experience. Our particular interest lies in the value of the hypotheses and conclusions of the book in their bearing upon the human soul from the psychoanalytic standpoint. With the insight that psychoanalysis gives into the diversities of the needs and of the working of different individuals it is easily understood how this philosophy can meet and strengthen the faith of many in the Absolute God and establish them more firmly in an active, efficient religion while with others it fails. There is throughout the book an assumption of the existence of the Absolute One, the Whole in relation to whom the individual religious man receives his peculiar mark of strength and authority, and in union with whom religion maintains her creative power in the world. Carefully and fully as the proof of such an Absolute is carried out, the existence of such a One, the Eternal, Un-Changeable One, the God demanded by the will of man, this proof fails to be convincing to all. The social experience of the existence of other minds does not necessarily reveal an Other Mind above and beyond this social experience; nor is it clear that the objectivity we find in nature and its apparent action upon one's self must depend upon an Absolute Creator, the Whole, in whom we must view other minds and nature. The ontological argument even as elaborated here seems indeed "some leap from idea to reality" as a proof of God. The final step in the argument, how man finding the unreality of nature and self thus has experience of Reality beyond, this step is not made clear.

There are many to whom this proof of God through the experience of a Reality through idea would be sufficient. Herein, then, lies the value to many of this system of philosophy. The Absolute, this

Changeless, Eternal Reality to whom in worship man must return, in relation to whom as the Whole his world must be valued, from whose presence with this re-valuation of his partial and individual activities he goes forth to creative work in the present and for immortality, this God is for them necessary and sufficient. They must have an Absolute God who is in this form but "a heightening," a refunding of their own desires and psychical needs, furnishing thus "a familiar canopy under which they are free to develop," a "Reality that makes for rightness." One in whom their own failures and weaknesses and the imperfections of their world may find satisfaction and final adjustment. Instead of recognizing the Absolute God as such a projection of the mind of man from the first attempt of primitive man for a sublimation of his primal instincts and desires to this highest level which culture has attained, our author presupposes throughout such a Reality to exist to which the mind of man has reached out and whom it has apprehended in certain sudden revelations of unique vividness and convincing experience.

There are many, however, with whom such a sublimation has failed and here this system will not meet the pragmatic test for all. The author indeed in his preface denies the validity of the positive side of pragmatism, that all that works is true, but admitting the negative side we find by that alone in our knowledge of many a soul in its psychical struggle that such a philosophy fails to work and therefore cannot be true for all. It has become all too evident to many a soul that this God is but a product of man's mind and they see clearly that He is but a projection of themselves, an object in whom they find the very desires and instincts which they must in an independent way work out into spiritual life; this sublimation impossible here because of the very objectivity of these as projected in Him. Worship can be for such no coming into relation with such a God where only they would find the infantile satisfaction and comfort which would serve to enhance the desires and phantasies upon which the introspective self is too ready to nourish itself. Though in a note on Leuba's theory Mr. Hocking criticizes the idea that the love of God is primarily a sexual love yet it is the testimony of psychoanalysis, which has examined the disturbances wrought by the unsuccessful attempts of those for whom the sublimation of such a religion fails to work, that man's idea of God and his turning to Him arises out of these fundamental instincts and desires of our natures; and psychoanalysis confirms both the failure of this faith in the Absolute God to transform these strivings and desires for some souls and at the same time its success for those with whom it works in a com-



plete and effective sublimation through which those who can use it become fruitful and creative in the world.

The author has added a note on the unconscious or "subconscious," rather, as he terms it in which he divides the "sub-conscious" into two parts, the "allied subconscious" which contains the habits and instincts making up our character and the "critical sub-conscious" which "maintains an existence of protest" recalling at times our conscious life from too great concentration upon external objects and ideas, bringing us back to our natural selves and thus getting again our relation to the Whole Idea. Not alone much simpler but more true to the fact is Bergson's picture of the unconscious, an undivided whole, the vast deposit of the conscious life admitted beyond the portals of consciousness only in so far as it is useful for our present purposes. As such a deposit, a product of our conscious life it is a product of our character, too, but is not that character itself, which has rather risen upon and beyond it. As to its critical function in bringing one to one's true self and in relation to the Whole Idea let one give himself to a clear and honest penetration into the unconscious as it reveals itself in dreams and imaginings when the vigilance of the conscious is relaxed and he will find there the mighty pressure of the primal instincts and desires seeking expression and satisfaction, restrained and prohibited by the cultural necessities of our conscious life. It is not the insistence upon the Whole Idea of the Absolute God, but the great whole of our being seeking its expression, that which in fact must find its transformed or spiritual expression in active creative life. If this is most effectively found through such a philosophy of religion as that before us then this has a truly useful function in the world. That this is of such service to many we cannot doubt, but it cannot be to all.

L. BRINK

THE BOOK OF THE DEAD: THE PAPYRUS OF ANI, SCRIBE AND TREASURER OF THE TEMPLE OF EGYPT, ABOUT B.C. 1450. By E. Wallis Budge, M.A., Litt.D., Keeper of the Egyptian and Assyrian Antiquities in the British Museum. G. P. Putnam's Sons, New York.

The anticipation of pleasure and profit with which one takes up these new volumes of Mr. Budge is more than justified on a closer acquaintance with them. We must first content ourselves with a brief outline of the plan of the book. It is the former part of the double title to which the author first devotes his attention. Mention is made of the various Recensions of the Book of the Dead found in the later

dynasties of the Egyptian Empire, but all compiled from the early sources of funerary literature found in the more ancient Pyramid Texts, but doubtless even here repetitions of written and recited texts in use in that still further antiquity which is lost in the obscurity of the receding, unexplored past.

Among the Recensions it is the Theban to which the author gives especial attention, the one in use from the eighteenth to the twenty-first dynasties, and inscribed in various papyri of the period. One of these, the Papyrus of Ani, is the special subject of these volumes.

After this brief history of the Book of the Dead and a description of the entire Theban Recension, Mr. Budge devotes some space to the beliefs as found in the Book of the Dead, more briefly and with more limited reference to their funerary character than in his "Osiris and the Egyptian Resurrection."<sup>1</sup> He begins with the legend of Osiris briefly stated and given from the Greek legends, for as he says there is no connected account of this in Egyptian literature, only constant reference to Osiris showing that all concerning him was "universally admitted fact" needing no explanation. The legend is supplemented with quotations from the Book of the Dead and other texts. The ideas of the Egyptians concerning eternal life, God and the gods, and of the abode of the dead, as found in this funerary book, are given followed by a descriptive list of the gods of the Book of the Dead, of the places mentioned therein, and a ritual of funerary ceremonies performed for the dead, who identified with Osiris were the beneficiaries of rites identical with those performed for the god.

Having thus prepared the way for a fuller understanding of it the author comes to the Papyrus of Ani itself, and we feel, as throughout the book, that he has opened up the treasure house of his abundant knowledge and resource in things Egyptian making available to the general reader this portion of the ancient past is so instructive and delightful a form and manner: making it not a dead but a living past.

A supplement to Volume I contains a series of beautiful plates, thirty-seven in all, which represent the facsimile of the original papyrus, the texts and the illustrative vignettes with the rubrics, all of which are made intelligible by a most detailed explanation, which fills the latter part of the first volume.

The second volume contains the text alone of the papyrus with extracts from other papyri amplifying the meaning, in hieroglyphics so clearly arranged and printed that no one can fail to follow them with at least some degree of understanding and interest and one al-

<sup>1</sup> Reviewed in the *PSYCHOANALYTIC REVIEW*, Vol. I, No. 3.

most forgets the difficulties that have been overcome before such a rendering of the original text could be made, or such a translation effected as accompanies the hieroglyphics on each page and carries the reader directly into the realities of these funerary texts, as they appealed with vital meaning to those by whom and for whom they were recited or inscribed.

Such an outline can only hint at the content of these volumes. The author has such a true insight into the real meaning of these beliefs and ceremonies, ever bearing in mind and reminding his reader that they are part of the growth and development of these people out of their remote African ancestry, that his works are of especial value to those who study the human struggle with instinctive forces, and the gradually developing sublimation of these. The book abounds in the phantasies that are found in childhood life and in those who through mental illness have been unable to forsake these infantile ideas. Here in the childhood of the race these are gravely accepted as vital beliefs dominating thought and life as impelling reasons for the elaborate ceremonials and rituals for the dead.

The whole conception of the gods, particularly those of the dead, is involved in the instinctive striving after life and immortality expressing itself in these many phantasy forms. Their dead god Osiris, through the magical power of his faithful wife Isis, is enabled to procreate a son, Horus, who restores life to his father through his Eye. By the Eye of Horus every deceased follower identified with Osiris is in turn raised to everlasting life. The eye is the source of life and its emissions no less so. In an ancient belief rain came from the tears out of the injured eye of the sky-god. Again the great god Khepera "joined his members together, and then wept tears upon them, and men and women came into being from the tears which fell from his eyes."

Nor was the mouth less significant. The most necessary ceremony for the dead, to which important chapters of the Book of the Dead are devoted, was that of Opening the Mouth of the deceased as only thus could he go about freely to enjoy the pleasures of everlasting life. In another account of the creation men came into existence when the thoughts of the creator were put into words. No creation was made in visible form until words had been spoken. Khepera came into being by pronouncing his own name.

Closely related ideas occur in the very old legend of the repeated birth of the sun and the moon. Each at its setting entered the mouth of the sky-woman to be reborn from her body at the next rising. In the journey of the sun-god Rā through Tuat, the region of the dead,



through which also the deceased must pass to reach the blessed abode of Osiris, before his re-ascent to the sky the sun-god and his assistant gods with him are transformed by passing from the tail to the head through the body of a serpent. Indeed this whole journey through the Tuat reads like a vivid, neurotic dream abounding in serpent monsters, gods and goddesses with flaming fires emanating from their bodies; countless forms and expressions of the sexuality striving for outlet, which these early Egyptians could express thus in concrete and animistic form, and though, in a crude and burdensome way could transform into an effectual activity.

In a significant passage directly from the Papyrus of Ani Thoth says to the deceased, "Tell me, whose heaven is of fire, whose walls are living serpents, and whose ground is a stream of water? Who is he?" The answer is "Osiris." Thoth continues: "Advance now, thy name shall be announced to him. Thy cakes shall come forth from the Utchat (Eye of Horus), thy ale shall come from the Utchat and the offering which shall appear to thee at the word upon earth [shall proceed] from the Utchat." The abundance of food and drink in the funerary offerings signifying the life giving Eye of Horus and life through the emanations and emissions of the gods, the conception of the great celestial water, source of all, personified in the sky-god Nu, the personification of the fertile Nile waters, all these are abundantly illustrative of the infantile and neurotic phantasies which psychoanalysis is uncovering from the hidden unconscious. And a study of these as we find them here helps in the understanding of the phantasies both on the part of the physician and the sufferer, too, in a way that sets them in their proper place and robs them of their terrors. All these and more than we can mention here has the author's interpretation of the book of the Dead made available for us and he has given us a large portion of that Book of the Dead in such form that we can go to it directly to search and find for ourselves.

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